116000115430

(Requestor's Name)			
K2D Capital Group LLC			
- 6241 Pembroke Rd -			
Hollywood FL 33023			
_ (Muuless)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
, ,			
(Document Number)			
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June 25, 2018

K&D CAPITAL GROUP LLC 6241 PEMBROKE RD HOLLYWOOD, FL 33023

SUBJECT: K&D CAPITAL GROUP LLC

Ref. Number: L16000115430

We have received your document for K&D CAPITAL GROUP LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 918A00013161

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resubmitted 07/03/18

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: K& D Coupital Group LL C Name of Limited Liability Company
Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Eran Reizer Name of Person
KED Capital Group Firm/Company
6241 Pembroke Rol Address
Hollywood FL 33023 City/State and Zip Code
dafna @ KND Gapital Group. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dorfna Malovaru at (954) 368. 9660 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
□ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy
We've paid \$35.00 by an error Please refund us \$10.00, overpayment
Please refund us \$ 10.00, overpayment

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: $\sqrt{\kappa \nu D C}$	iapital Group	uc
2. (a) 6241 Pembroke Rd, Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) Hollywood FL 33023	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3. Date of filing/registration in Florida 5. (a) FRAN REIZER	L 16	000115430 Document number
Registered Agent and Registered Office shown on the reconded to the Registered Office Address (MUST BE FLORIDA STREET		
Hollywool (b) Jeffrey Taraboulo Enter name of NEW Registered Agent and/or NEW Registered Pl 1625 N. Commerce Pl	Stered Office address:	-9 PM 4:1
NEW Registered Office Address: Weston	,FL 33326	
If the limited liability company is not organized under the change or changes are made, the Florida street addre agent will be identical. Or, in the case of a Florida limit was/were authorized by an affirmative vote of the memb the articles of organization or the operating agreement of	ne laws of the State of ess of the registered off ed liability company, in pers of the limited liability of	ice and the business office of the registered it is hereby confirmed that the change(s) lity company or as otherwise provided in
Signature of a member or authorized representative of a member I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compute obligations of my position as registered agent as proto merely reflect a change in the registered office address notified in writing of this change Signature of Registered Agent Division of Corporations P	d agree to act in this c pleie performance of n ovided for in Chapter to ss, I hereby confirm th	apacity. I further agree to comply with the ny duties, and I am familiar with and accept 505, F.S. Or, if this document is being filed at the limited liability company has been

FILING FEE: \$25.00