

P140000 35391

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

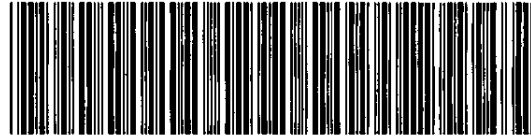
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100263483091

08/25/14--01026--022 \*\*35.00

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

14 AUG 25 PM 2:16

FILED

AUG 29 2014

C. CARROLL

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KIFKC Funding, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P14000035391

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eric Khrom  
Name of Contact Person

KIFKC Funding Inc  
Firm/Company

1691 Michigan Avenue, Rm 230, ~~Prater Beach 33434~~  
Address

Miami Beach, Florida 33139  
City/State and Zip Code

ekhrom@khromcapital.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eric Khrom at ( 212 ) 376-5337  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: KIFKC Funding INC
2. The principal office address: 1691 Michigan Avenue, Rm 230, Miami Beach, Florida 33139
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 4/21/14 Document number: P14000035391
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

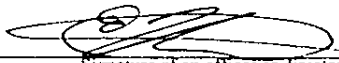
Eric Khrom  
1691 Michigan Avenue, 2nd Floor  
Miami Beach, FL 33139

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Eric Khrom  
1691 Michigan Avenue, Room 230  
P.O. Box NOT acceptable  
Miami Beach, FL 33139


The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Eric Khrom  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, hereby confirm that the corporation has been notified in writing of this change.*

  
Signature of Registered Agent

08/19/2014  
Date

If signing on behalf of an entity:  
\_\_\_\_\_  
Typed or Printed Name

FILED  
AUG 25 PM 2:16  
TALLAHASSEE, FLORIDA

\*\*\* FILING FEE: \$35.00 \*\*\*