

P96000054943

(Requestor's Name)

Sender's Name Robert C. Adamski Phone 237 542-4733

Company ADAMSKI, ROBERT C. ATTY

Address 1714 CAPE CORAL PKWY E

City CAPE CORAL State FL ZIP 33904-9420

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

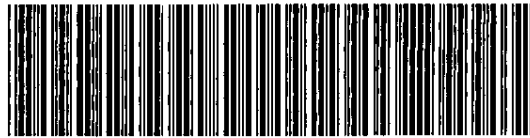
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2011 DEC 13 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A.

TBROWN 12-15-11

Burandt, Adamski, Powell & Feichthaler, PL

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December 12, 2011

Secretary of State
Divisions of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Filing of Articles of Organization
Conidaris Management Corporation, Inc.

Dear Sirs:

Enclosed please find Articles of Organization for the above filing, one original and a copy.
Also enclosed please find our check in the amount of \$78.75 to cover the cost of the filing fee,
the registered agent fee and a Certificate of Status.

Secondly, and please process in this same order,

RE: Filing of Certificate of Limited Partnership
Lani Kai, LP

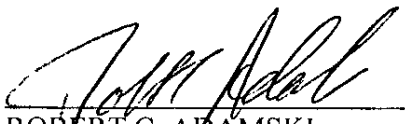
Please accept the enclosed original and one copy of a Certificate of Limited Partnership for
filing. Enclosed also is our check in the amount of \$1,000.00 to cover the cost of filing fee
(\$965.00) and Registered Agent Designation (\$35.00) and a Certificate of Status (\$8.75).

RE: Filing of Statement of Change
LKLB of Florida, Inc.

Please accept the enclosed original and one copy of a Statement of Change of Registered Office
or registered Agent or Both for Corporations and the filing fee (\$35.00).

Thank you for your assistance with this matter.

Very truly yours,



ROBERT C. ADAMSKI

RCA/tb

Enclosure

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

FILED
2011 DEC 13 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502, 617.0502, 602.1508 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 is **LKLB of Florida, Inc.**
2. The principal office address is **1400 Estero Boulevard, Fort Myers Beach, Florida 33931.**
3. The mailing address is **the same.**
4. Date of incorporation/qualification is **June 27, 1996, Document number P96000054943.**
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State is **Michael R. Whitt, Esq.
BECKER & POLIAKOFF, P.A.
14241 Metropolis Avenue
Fort Myers, FL 33912 US**
6. The name and street address of the new registered agent (if changed) and/or registered office (if changed) is **Robert C. Conidaris
1400 Estero Boulevard
Fort Myers Beach, FL 33931**

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.


Robert C. Conidaris, President

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, I hereby confirm that the corporation has been notified in writing of this change.


Robert C. Conidaris, Registered Agent

DECEMBER 9, 2011
Date

Filing Fee: \$35.00 made payable to the Florida Department of State, and mail to Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.

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