# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD P. ZILEWICZ

Electronic Signature of Signing Authorized Person(s) Detail

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L06000024489

Entity Name: KLAS, ETCETERA, LLC

## **Current Principal Place of Business:**

115 STUYVESANT RD ASHVILLE, NC 28803

#### **Current Mailing Address:**

115 STUYVESANT RD ASHVILLE, NC 28803 US

## FEI Number: 26-1970123

### Name and Address of Current Registered Agent:

MALLONEE, JAMES ESQ. 946 TAMIAMI TRAIL # 206 PORT CHARLOTTE, FL 33593 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:	JAMES MALLONEE			01/16/2017
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	MGRM	
Name	SCHWARTZ, EILEEN	Name	ZILEWICZ, ED	
Address	115 STUYVESANT RD	Address	115 STUYVESANT RD	
City-State-Zip:	ASHEVILLE NC 28803	City-State-Zip:	ASHEVILLE NC 28803	

VICE PRESIDENT

01/16/2017

FILED Jan 16, 2017 Secretary of State CC1473131184

Certificate of Status Desired: No

Date