

**2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000000728

**Entity Name:** KA19, LLC

**Current Principal Place of Business:**

2445 TAMPA ROAD, UNIT I  
C/O DANIEL G. MUSCA, ESQ.  
PALM HARBOR, FL 34683

**Current Mailing Address:**

2445 TAMPA ROAD, UNIT I  
C/O DANIEL G. MUSCA, ESQ.  
PALM HARBOR, FL 34683 US

**FEI Number:** 27-1583880

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MUSCA, DANIEL G. ESQ.  
2445 TAMPA ROAD, UNIT I  
PALM HARBOR, FL 34683 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:** DANIEL G. MUSCA

10/15/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name GEFFRARD, DEBORAH M  
Address 333 NW NINTH AVENUE  
City-State-Zip: PORTLAND OR 97209

*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:** DEBORAH M. GEFFRARD

MANAGER

10/15/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date