

A96000002334

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

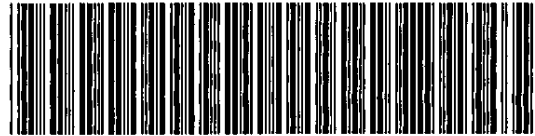
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000299059240

05/11/17--01035--017 **35.00

MAY 12 2017
S. YOUNG

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 MAY 11 PM 2:38



CORPORATION SERVICE COMPANY

CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: May 9, 2017

Order#: 623632/003

Re: KESSLER F.P., LTD.

Enclosed please find:

XX Change of Registered Agent and Office.
XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.
XX Issue Proof of Filing.
XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard
c/o Corporation Service Company
2711 Centerville Road, Suite 400
Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 MAY 11 PM 2:38

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. KESSLER F.P., LTD.
Name of Limited Partnership or Limited Liability Limited Partnership
2. 12/17/1996 3. A96000002334
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Harold Kessler
Name
18001 Old Cutler Road
Address
Miami FL 33157
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box not acceptable)
Tallahassee FL 32301
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Jill E. Cilmi
Signature of General Partner Jill Cilmi, Vice President on behalf of Saryan, Inc., General Partner

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 obligations of my position as registered agent.

By: Lindsey M. Lockard
Signature of Registered Agent

Lindsey M. Lockard, Asst. Vice President

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 MAY 11 PM 2:38