

BD6 0000 00069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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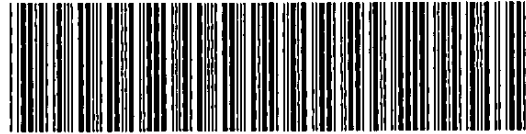
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

MAY 17 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kraus Family Limited Partnership (2005)
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: B06000000069

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

Please return all correspondence concerning this matter to:

Conrad Damon, Esquire
Contact Person
Ward, Damon, Posner, Pheterson and Bleau PL
Firm/Company
4420 Beacon Circle
Address
West Palm Beach, FL 33407
City, State and Zip Code
mweber@tanemdevelopments.ca
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Conrad Damon at (561) 842-3000
Name of Contact Person Area Code and Daytime Telephone Number

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

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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**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. Kraus Family Limited Partnership (2005)
Name of Limited Partnership or Limited Liability Limited Partnership
2. 12/5/05 3. B06000000069
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:

Bosso, Bosso & Pardo, P.A.
Name
2428 Broadway
Address
Riviera Beach, FL 33404
City, State and Zip

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

Conrad Damon, Esquire
Name
4420 Beacon Circle
Florida street address (P.O. Box not acceptable)
West Palm Beach FL 33407
City, State and Zip

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

KRAUS FAMILY FLORIDA GP, INC.

Nelson Kraus
Signature of General Partner

Nelson Kraus, 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 obligations of my position as registered agent.

[Signature]
Signature of Registered Agent

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