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(Requestor's Name)							
(Address)							
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PICK-UP WAIT MAIL							
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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	K3 Strategies, LLC					
SOBJE	Name of Limited Liability Company					
Dear Si	r or Madam:					
The end	closed Registered Agent/Registered	Office Change and	d fee(s) are submitted for filing.			
Please 1	eturn all correspondence concernin	g this matter to the	following:			
Cynthia	Ayris Kemp					
	Name of Person					
K3 Strat	egies, LLC					
	Firm/Company					
7589 Se	th Raynor Place					
	Address				- i.	
Sarasota	, FL 34240			19 NOV	15125	
	City/State and Zip Coo	de		¥ 26		
cynthia(@k3strategies.com			3	200	
E-	mail address: (to be used for future	annual report noti	fication)	9: 38	2007 2007 2007	
For furt	her information concerning this ma	tter, please call:		3	STATE OR ATTORS	
Cynthia	Ayris Kemp	941 at (725-2614		-	
	Name of Person		Area Code & Daytime Telephone Number	r		
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the follow	ving amount:				
L	\$25 Filing Fee		555 Filing Fee & Certified Copy			

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

. (a)		(b	o)				
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	7589 Seth Raynor Place		7589 Seth R	Raynor Place			
	Sarasota, FL 34240		Sarasota, FL 34240				
	January 23, 2002		L0200000226	66			
.	Date of filing/registration in Florida	4.)	Document number	r		
i. (a)							
. (a)	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of State	:			
	MILONAS, TASO M						
	Registered Office Address (MUST BE FLORIDA STREE						
	2639 Fruitville Road, Suite 101						
	Sarasota	34237			<u></u>		
		FL			19 HOV		
(b)					157 P. V 26		
(0)	Enter name of NEW Registered Agent and/or NEW Register	ed Office ad	dress:	•	温べた		
					조 조약 S S S S S S S S S S S S S S S S S S		
	CYNTHIA AYRIS KEMP		STATE ORATIO				
	NEW Registered Office Address:				6 10 King		
	7589 Seth Raynor Place				,		
	Sarasota	34240					
	, ,	FL					
hange gent v /as/wo	imited liability company is not organized under the less or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members of the organization or the operating agreement of the content of the content of the operating agreement of the content of the operating agreement of the content of the content of the operating agreement of the content of	he registere liability co s of the lim	ed office and impany, it is lited liability	I the business office hereby confirmed company or as of	ce of the registered that the change(s)		
(yuthin ayu Kemp, ure of a member authorized representative of a member	Cynt	thia Ayris Kei	mp			
Signa	fure of a member of authorized representative of a member			Printed or typed name	e of signee		
herei rovisi ne obl	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address,	gree to act te performo led for in C I hereby co	in this capa ance of my d Chapter 605, onfirm that th	city. I further agr luties, and I am fai F.S. Or, if this de he limited liability	ee to comply with the miliar with and accep ocument is being filed company has been		

Division of Corporations • P.O. Box 6327 • Taliahassee, FL 32314 FILING FEE: \$25.00

ture of Registered Agent