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SEP 2 3 2013

D. DRUCE

## **COVER LETTER**

Division of Corporations		
SUBJECT: K&V Ventures, L	LC	
	Limited Liability Company	<del></del>
Dear Sir or Madam:		
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for fi	ling.
Please return all correspondence concerning	this matter to the following:	
Larry S. Kabinoff		
Name of Person		
Firm/Company		
P.O. Box 5206		
Address	<del></del>	
Sarasota, FL 34277		
City/State and Zip Code		
Larry@greatfloridainvestm	nents.com	
E-mail address: (to be used for future annual report	notification)	金融 路
For further information concerning this matt	ter, please call:	SEP 20 AH
Larry Kabinoff	_ <sub>at (</sub> 941 <sub>)</sub> 268-3156	
Name of Person	Area Code & Daytime Telephone Numl	55 S
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the followi	ng amount:	
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	/

TO: Registration Section

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

l.	Nai	ne of the limited liability company: K&V Ventures, LLC				
2	(0)	Principal office address of limited liability company	r. 443 Bird Key Dr			
۷.	(a)	(Note: MUST BE STREET ADDRESS)	Sarasota, FL 34236			
		(Tote: Mest be street noones)		<del></del>		
(ŀ	(b)	Mailing address of limited liability company:	P.O. Box 5206			
	(-)	(Note: MAY BE POST OFFICE BOX)	Sarasota, FL 34277			
		<del>, , , , , , , , , , , , , , , , , , , </del>				
02/	24/200	13	L03000006614	····		
3.	Dat	e of filing/registration in Florida	4. Document number			
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
		Registered Agent:	Larry S. Kabinoff			
		Registered Office Address:	949 Tamiami Trail			
		registered office / regress.	Unit 204			
			Port Charlotte, FL 33953			
	` '	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :				
		NEW Registered Office Address:	443 Bird Key Dr.			
		(MUST BE FLORIDA STREET ADDRESS)	N C	2		
			Salasota Fil E Oreso	<b>33</b> 000		
CO	ntin	imited liability company is not organized under the med that after the change or changes are made, the F	aws of the State of Florida, it is hereby lorida street address of the registered office			
an	d th	e business office of the registered agent will be ident	ical. Or, in the case of a Florida limited			
!!!a	DIIII me	y company, it is hereby confirmed that the change(s) imbers of the limited liability company or as otherwi	se provided in the articles of organization of	Oiv		
the	e op	erating agreement of the limited liability company.	be provided in the difference of organization of	•		
	1					
Sin	A	of a member or authorized representative of a member	_			
318	ilata.	e of a member of authorized representative of a member				
		Cabinoff	_			
		or typed name of signee				
1 i co an Cr ad	here mpl d I d japt dres	by accept the appointment as registered agent and a y with the provisions of all statutes relative to the pr am familiar with and accept the obligations of my po er 608, F.S. Or, if this document is being filed to me as, I hereby confirm that the limited liability compan	gree to act in this capacity. I further agree oper and complete performance of my dutie, sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change	to s, i		

Signature of Registered Agent