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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: The KUTZIM Group LLC  Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Jeffrey Kurland Name of Person		
The Kurzin Group 21C Firm/Company		
13190 SW134 St #107		
Migw FL 33186 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Jeffrey Kurlgul at (305) 2017-88-7-109 Name of Person Area Code & Daytime Telephone Number		
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 following amount:		
□ \$25 Filing Fee  □ \$55 Filing Fee & Certified Copy		

## 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.

1. Name of the limited liability company: 1 k	VICIN Group LLC
2. (a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	13190 SW 13451 #107 Manie F 33186
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	13190 SW 1345+ #107 Man, Fi 33186
9/25/2003  3. Date of filing/registration in Florida	<u>L 03000036497</u> 4. Document number
5. (a) Registered Agent and Registered Office shown on Registered Agent:	Jeffrey Kurland
Registered Office Address:	17190 SW 134 St #107
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>	W Registered Office address:
NEW Registered Agent:  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	13190 SW 1345+ #107 Man.
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identicability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company.  Signitude of a member or authorized representative of a member  Printed or typed name of significant sig	lorida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote of
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pr and I any familiar with and accept the obligations of my po Chapter 608, F.S. On if this document is being filed to me affiness, I hereby confirm that the limited liability compan	

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