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M. THOMAS

MAR 23 2009

EXAMINER

COVER LETTER

Registration Section

TO:

INHS18 (5/08)

Division of Corporations SUBJECT: Kunshier Properties 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: Dena Marie Kunshier (Name of Person) Kunshier Properties LLC (Firm/Company) 10656 Russell Road (Address) Bokeelia FL 33992 (City/State and Zip Code) For further information concerning this matter, please call: Dena Marie Kunshier (Area Code & Daytime Telephone Number) (Name of Person) **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 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: Kunshier Properties LLC		
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	10656 Russell Road Bokeelia FL 33992
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	PO Box 521 Bokeelia FL 33992
			L04000007192
3.	Dat	e of filing/registration in Florida	I. Document number
5.	(a)	Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
>		Registered Agent:	Dena Marie Kunshier
		Registered Office Address:	Dena Marie Kunshier 10656 Russell Road Bokeelia FL 33992 20 20 20 20 20 20 20 20 20
:		•	Registered Office address:
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
NEW Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	200 Park Land Drive Lake Placid □, FL 33852
tha of he lia lin	at affice reby bilit	imited liability company is not organized under the later the change or changes are made, the Florida street of the registered agent will be identical. Or, in the cay confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company. Lua Marie Humbie re of a member of authorized representative of a member)	aws of the State of Florida, it is hereby confirmed address of the registered office and the business se of a Florida limited liability company, it is
in I in an i	rinted here iply fan S. C nfirj	Marie Kunshier or typed name of signee) by accept the appointment as registered agent and age with the provisions of all statutes relative to the pro- niliar with and accept the obligations of my position of or, if this document is being filed to merely reflect a contact the limited liability company has been notified where of Registered Agent)	ree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.

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