

L05000055775

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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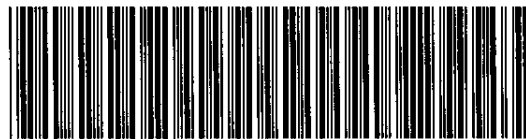
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*W*

J. BRYAN  
JUL 10 2012  
EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 23, 2012

HANNA H SAIKALI  
KARS R US OF JACKSONVILLE, LLC  
8643 ATLANTIC BLVD  
JACKSONVILLE, FL 32211

SUBJECT: KARS R US OF JACKSONVILLE, LLC  
Ref. Number: L05000055775

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TALLAHASSEE, FLORIDA

We have received your document for KARS R US OF JACKSONVILLE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan  
Regulatory Specialist II

Letter Number: 212A00015039

**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: Kars R Us of Jacksonville, LLC

2. (a) Principal office address of limited liability company: 8643 Atlantic Blvd

**(Note: MUST BE STREET ADDRESS)**

Jacksonville, FL 32211

(b) Mailing address of limited liability company: \_\_\_\_\_

**(Note: MAY BE POST OFFICE BOX)**

June 6, 2005

3. Date of filing/registration in Florida

L05000055775

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

The Farah Law Firm

Registered Office Address:

1506 Prudential Drive

Jacksonville, FL 32207

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

Nadia Saikali

**NEW** Registered Office Address:

1860 University Blvd S

**(MUST BE FLORIDA STREET ADDRESS)**

Jacksonville, FL 32211

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

  
Signature of a member or authorized representative of a member

Hanna H Saikali

Printed or typed name of signee

*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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00