

105 000 117694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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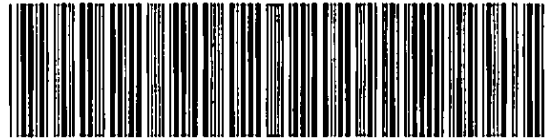
(Business Entity Name)

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TO: Registration Section
Division of Corporations

SUBJECT: KITE SIO PROJECT 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:

LINDA M. PARRISH

Name of Person

KMETZ ELWELL GRAHAM + ASSOC., PLLC

Firm/Company

1575 INDIAN RIVER BLVD., STE C240

Address

VERO BEACH, FL 32960

City/State and Zip Code

lparrish@kega.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRIAN J. ELWELL CPA

Name of Person

at (772) 231-6902

Area Code & Daytime Telephone Number

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 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 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.

1. Name of the limited liability company: KITE SIO PROJECT LLC
2. (a) 1575 INDIAN RIVER BLVD, SUITE C240 (b) 1575 INDIAN RIVER BLVD, SUITE C240
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

VERO BEACH, FL 32960

3. 12/9/2005 Date of filing/registration in Florida 4. L05000117694 Document number

5. (a) STEARNS WEAVER MILLER WEISSLER ALHADEFF + SITTERSON P.A.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

C/O K. TAYLOR WHITE

150 WEST FLAGLER ST., SUITE 2200

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

MIAMI, FL 33130

- (b) KMETZ ELWELL GRAHAM & ASSOCIATES PLLC

Enter name of NEW Registered Agent and/or NEW Registered Office address:

1575 INDIAN RIVER BLVD., SUITE C240

NEW Registered Office Address:

VERO BEACH, FL 32960

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.

Keith D. Kite
Signature of a member or authorized representative of a member

KEITH D. KITE
Printed or typed name of signer

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 605, 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]
Signature of Registered Agent