

1060000020309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

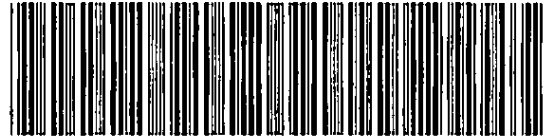
(Business Entity Name)

(Document Number)

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C. BRUMBLEY  
DEC - 9 2021

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: KITE VERO NORTH 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.cpa.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

**Mailing Address:**

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

**Street Address:**

Registration  
Division of  
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2415  
Tal

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ 2

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 VERO NORTH 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

VERO BEACH, FL 32960

3. 2/23/2006 4. L06000020309  
Date of filing/registration in Florida Document number

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

150 WEST FLAGLER STREET, 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.

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

KMETZ D. KITE  
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 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

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2021 NOV 17 AM 9:38  
TALLAHASSEE, FL  
STATE OF FLORIDA  
DIVISION OF CORPORATIONS