L06000058563

CARVER, DARDEN, KORETZKY, TESSIER, FINN, BLOSSMAN & AREAUX LLC NEW ORLEANS PENSACOLA

LINDA A. HOFFMAN

1300 WEST MAIN STREET PENSACOLA, FLORIDA 32501

☐ PICK-UP	☐ WAIT	☐ MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Fi	ling Officer:				
		:			

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

J. BRYAN SEP 6 200

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Kuklish & Associates, 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 A. Hoffman		
(Name of Person)	37 SE	
Carver Darden	OT SEP 14 PH 1:44	
(Firm/Company)	PH.	
1300 W. Main Street		
(Address)	······································	
Pensacola, FL 32501		
(City/State and Zip Code)		
For further information concerning this matt	ter, please call:	
Carol Battles	at (850) 266-2300	
(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	ng amount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 6, 2007

CARVER, DARDEN, KORETZKY, TESSIER, FINN, ET AL ATTN: LINDA A. HOFFMAN 1300 WEST MAIN STREET PENSACOLA, FL 32501

SUBJECT: KUKLISH & ASSOCIATES, LLC

Ref. Number: L06000058563

OT SEP 14 PM 1: 44

We have received your document for KUKLISH & ASSOCIATES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan Document Specialist

Letter Number: 307A00053065

CARVER, DARDEN, KORETZKY, TESSIER, FINN, BLOSSMAN & AREAUX LLC NEW ORLEANS PENSACOLA

LINDA A. HOFFMAN PENSACOLA OFFICE

(850) 266-2302 hoffman@carverdarden.com

September 12, 2007

OT SEP 14 PH 1: 44

Joey Bryan Document Specialist Florida Department of State Division of Corporations P.O. Box 6327. Tallahassee, FL 32314

RE: Your Letter No: 307A00053065

Subject: Kuklish & Associates, LLC - L06000058563

Dear Joey:

We are in receipt of your September 6, 2007 letter, as referenced above. We have enclosed the completed forms for the change of Registered Agent office for this limited liability company. Ms. Hoffman has signed as Registered Agent and hereby confirms that Kuklish & Associates, LLC has been notified in writing of the change of address of the Registered Agent.

If you need further assistance, please contact me.

Sincerely,

Carol Battles

Legal Assistant to Linda A. Hoffman

/ccb Enclosures

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. The name of the limited	l liability company is:	Kuklish & Associates, LLC		
2. The mailing address of	the limited liability cor	mpany is : 4051 Barrancas Avenue, Suite	G,	
Pensacola, FL, 32507				
06/07/2006		L06000058563		
3. Date of filing/registration	on in Florida	4. Document number		
5. The name of the register Florida Department of S	red agent and the regist tate:	ered office address as shown on the reco	ords of the	
	Linda A. Hoffman	NI.		
		Name		
		& Condon, 30 S. Spring Street	D	
	Pensacola, FL 32502	Addicas	O7 NVIS	
•		State and Zip	SE SE	
Pensacola, FL 32502 City, State and Zip 6. The name and address of the new registered agent and/or office: Linda Hoffman Carver Darden Name 1301 West Main Street Florida street address (R.O. Rev. NOT acceptable)				
	Linda Hoffman		T CONTE	
	Carver Darden		PH POS	
	N 1301 West Main Street	ame	- A	
-		(P.O. Box NOT acceptable)	++ 0880	
	riorida sucet address	(1.0. Box 1401 acceptable)	O,	
<u>.</u>	Pensacola	FL 32501		
	City, Sta	ate and Zip		
confirmed that after the charand the business office of t liability company, it is here	ange or changes are ma he registered agent will by confirmed that the ited liability company of	nder the laws of the State of Florida, it is ide, the Florida street address of the regist be identical. Or, in the case of a Florid change(s) was/were authorized by an affor as otherwise provided in the articles of company.	stered office a limited irmative vote	
Signature of a member or authoriz	ed representative of a member)		
Thomas Kukli	cla			
(Printed or typed name of signee)	21/			
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby configuret	atment as registered ago of all statutes relative accept the obligations is document is being fit hat the limited liability	. ent and agree to act in this capacity. I fi to the proper and complete performance of my position as registered agent as pr led to merely reflect a change in the regi company has been notified in writing of	irther agree to of my duties, ovided for in stered office this change.	

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