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SECRETARY OF STATE

T. HAMPTON
JUN 2 4 2008

EXAMINER

· COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: K & R Ventures, LLC (Name o	of Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered O	office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Karen Shapiro, Esquire (Name of Person)		
Stein Sperling (Firm/Company)		
25 W. Middle Lane (Address)	······································	
Rockville, MD 20850 (City/State and Zip Code)		
For further information concerning this matte	er, please call:	
Karen Shapiro	at (301) 838-3222 (Area Code & Daytime Telephone Number)	
(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 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: K & R Ventur	res, LLC
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	1684 N. Dimaggio Path Hernando, FL 34442
(WARE MOOT DE STREET APPRESS)	methands, rp 34442
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1684 N. Dimaggio Path Hernando, FL. 34442
08/22/2006	1.06000082919
3. Date of filing/registration in Florida 4.	Document number
5. (a) Registered Agent and Registered Office shown on the	e records of the Florida Dept. of State:
Registered Agent:	Ralph Massullo, Jr.
Registered Office Address:	1684 N. Dimaggio Path Hermando, FL 34442
=	Hermando, FL 34442
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:
NEW Registered Agent:	Kevin Powers
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1684 N. Dinaccio Path > ———————————————————————————————————
If the limited liability company is not organized under the law that after the change or changes are made, the Florida street a office of the registered agent will be identical. Or, in the case hereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of climited liability company. (Signature of a member or authorized representative of a member) (Frinted or typed name of signee) I hereby accept the appointment as registered agent and agric compty with the provisions of all statutes relative to the proper am familiar with and accept the obligations of my position as F.S. Or if this document is being filed to merely reflect a characteristic fregistered agent) (Signature of Registered Agent)	address of the registered office and the business e of a Florida limited liability company, it is an affirmative vote of the members of the limited organization or the operating agreement of the
Division of Corporations, P.O. Box 63	327, Tallahassee, FL 32314

FILING FEE: \$25.00

IN(IS)8 (05/08)