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Special Instructions to	Filing Officer:	,

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J. SAULSBERRY EXAMINER

AUG 0 7 2013

COVER LETTER

TO:	Registration Section Division of Corporations						
SUB.	ECT: K&SJ IIc Name of Limited Liability Company						
	Name of	Lilling	u Liavii	ity Co	inpany		
Dear	Sir or Madam:				•		
The e	enclosed Registered Agent/Registered	Office	Change	and fe	ee(s) are submitted for	or filing.	
Pleas	e return all correspondence concernin	g this m	natter to	the fo	ollowing:		
	Karim Hamid						
	Name of Person	•	•				
	K&SJ Ilc			_		,	
	Firm/Company					~	2013
					•	2 .	2013 AUG
	11455 gulf blvd.			_ `			1
	Address					**.	S
						-2.	ÂM
	Treasure Island Florida 33	706		_		32	င်း
	City/State and Zip Code						22
	Style_inc@hotmail.com	ì					
	Style inc@hotmail.com E-mail address: (to be used for future annual repor	t notificati	on)				
For f	urther information concerning this ma	itter, ple	ase call	•			
	Syrena Jones	at (_	727)	424-1351		
	Name of Person	(_		Area Co	de & Daytime Telephone I	Vumber	
	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 follow	ing am	ount:				
	\$25 Filing Fee	- 6	\$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.

Name of the limited liability company:	K&SJ llc				
2. (a) Principal office address of limited liability company	: 11455 Gulf blvd. 201				
(Note: MUST BE STREET ADDRESS)	Treasure Island, Florida 33706				
(b) Mailing address of limited liability company:	11455 Gulf Blvd 201				
(Note: MAY BE POST OFFICE BOX)	Treasure Island, Florida 33706				
01/17/2008	L08000006364				
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:				
Registered Agent:	THE LAW OFFICES OF NICK SPRADL				
Registered Office Address:	12000 NORTH DALE MABRY HWY SUN TAMPA, FL 33618				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> <u>NEW Registered Agent</u> :	V Registered Office address: Registered Agents Inc.				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3030 N. Rocky Point Dr. STE 150A				
MUSI DE L'URIDA STREET ADDRESS	Tampa ,FL33607				
If the limited liability company is not organized under the loconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company Signature of a member or authorized representative of a member Karim Hamid Printed or typed name of signee I hereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the province of a member and I am familiar with and accept the obligations of my postulations, I hereby confirm that the limited liability company	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization				
Dan Keen-E					
Signature of Registered Agent					

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