

L08000014903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

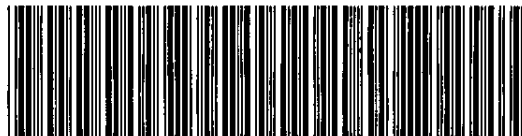
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
15 APR -3 AM 7:44

C.L.
4-22-15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 3, 2015

ALLISON H. BURNS / K & L INVESTMENT MANAGEMENT, LLC
13118 WEXFORD HOLLOW RD N
JACKSONVILLE, FL 32224 US

SUBJECT: K & L INVESTMENT MANAGEMENT, LLC
Ref. Number: L08000014903

We have received your document for K & L INVESTMENT MANAGEMENT, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 215A00006665

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: K & L INVESTMENT MANAGEMENT, 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:

ALISON H. BURNS

Name of Person

K & L INVESTMENT MANAGEMENT, LLC.

Firm/Company

13118 Wexford Hollow Rd. N.

Address

Jacksonville FL 32224

City/State and Zip Code

aburns@rdofFlorida.com

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

For further information concerning this matter, please call:

ALISON H. BURNS

at (

904

) 992 6468

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

PREVIOUSLY SUBMITTED
\$35 FILING w/ corp paperwork.

**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: K & L INVESTMENT MANAGEMENT, LLC.
2. (a) 13118 Wexford Hollow Rd N. (b) 4745 SUTTON PARK Ct 805
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
Jacksonville FL Jacksonville FL
32224 32224
3. 2/11/08 4. L08000014903
Date of filing/registration in Florida Document number
5. (a) BRENNAN, MANNA & DIAMOND P.L
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
76 South Laura Street
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Suite 1700
Jacksonville, FL 32202
- (b) Gunster, Yoakley, & Stewart, P.A.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
ONE Enterprise, 225 Water St.
NEW Registered Office Address:
1750
Jacksonville, FL 32202

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.

Josef Buchner
Signature of a member or authorized representative of a member

Josef Buchner, MGR
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

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 APR -3 AM 7:44