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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. SCOTT  
DEC 30 2016



December 28, 2016

Division of Corporations  
Clifton Bldg  
2661 Executive Center Circle  
Tallahassee, FL 32301

RE: Katielle LLC

Dear Sir/Madam:

Please file the following:

1. Statement of Change of Registered Agent
2. Check no. 1359 in the amount of \$25 paying for the filing fee.

**PLEASE RETURN FILING EVIDENCE TO ME VIA EMAIL**  
**KBISHOP@URSAGENTS.COM OR VIA FAX 800-815-0477**

*I have enclosed a Self-Addressed Stamped Envelope for return of the original filing copy.*

Thank you for your assistance. If you have any questions or any delays in filing, please call me using our toll free number 800-567-4397 or email me at KBishop@ursagents.com.

Respectfully,

Kanetha Bishop  
16-12-0329/7605

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KATIELLE 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:

AMANDA SWEET

\_\_\_\_\_  
Name of Person

KATIELLE LLC

\_\_\_\_\_  
Firm/Company

9500 SOUTH DADELAND BOULEVARD, SUITE 800

\_\_\_\_\_  
Address

MIAMI, FL 33156

\_\_\_\_\_  
City/State and Zip Code

asweet@sailormen.com

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

For further information concerning this matter, please call:

URS Agents C/O Kanetha Bishop at ( 800 ) 567-4397  
\_\_\_\_\_  
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

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**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: KATIELLE LLC

2. (a) _____ Principal office address of limited liability company: (Note: <u>MUST BE STREET ADDRESS</u> ) <u>9500 SOUTH DADELAND BLVD., SUITE 800</u> <u>MIAMI, FL 33156</u>	(b) _____ Mailing address of limited liability company: (Note: <u>MAY BE POST OFFICE BOX</u> ) <u>9500 SOUTH DADELAND BLVD., SUITE 800</u> <u>MIAMI, FL 33156</u>
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3. _____ Date of filing/registration in Florida	11/25/2008 4. _____ Document number
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5. (a) \_\_\_\_\_  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
C T CORPORATION SYSTEM  
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

(b) \_\_\_\_\_  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
URS AGENTS, LLC  
NEW Registered Office Address:  
3458 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312

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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.

[Signature]  
Signature of a member or authorized representative of a member

Robert S. Berg  
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] Kanetha Bishop, Assistant Secretary  
Signature of Registered Agent