

### Florida Department of State **Division of Corporations** Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850) 617-6383

From:

Account Name : LEGALZOOM.COM INC. Account: Number : 120010000062 : (323)962-9600 Phone : (323)962-3889 Fax Number

\*\*Enter the email address for this business entity to be used for  $f_{\overline{s}}$ annual report mailings. Enter only one email address please.\*

Email Address:

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LLC REGISTERED AGENT CHANGE	
<b>KETTELY ACCOUNTING SERVICES LLA</b>	C



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Help

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### COVER LETTER

TO: Registration Section Division of Corporations

## SUBJECT: KETTELY ACCOUNTING SERVICES LLC

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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:

**Cheyenne Moseley** 

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N. Brand Blvd., 10th Floor

Address

Glendale, CA 91203

City/State and Zip Code

#### kettelyj68@gmail.com

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

For further information concerning this matter, please call:

Cheyenne Moseley	800 773-0888 ext 9724
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRES	S: MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the follo	owing amount:
🗅 \$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (2/14)

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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. 1	Name of the limited liability company:KETTELY A	CCOUNTING	SERVICES LLC		
2. (a					
2. (4	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (")	Mailing address of limited li (Note: MAY BE POST C		
	MIAMI, FL 33168	MIA	WI, FL 33238		_
~	06/24/2010		00067833		_
3.	Date of filing/registration in Florida	4.	Document number		
5. (	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat 14325 NW 3 AVENUE Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		SEURI TALLA	17 OCT SEGRETZ TALLAHA	<u>-</u>
	MIAMI, FL	<u>_</u> 33168		CT -9 ETARY OF HASSEE	Ē
(b	UNITED STATES CORPORATION AGENTS	S, INC.		AN 8: 02 FSIATE FLORIDA	D
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:		DA DA	
	13302 WINDING OAK COURT, SUITE A				
	NEW Registered Office Address:				
	ТАМРА, FL	33612			
the cl agent was/v	limited liability company is not organized under the lav hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited have vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	The registered of ability company, of the limited liab	flice and the business office it is hereby confirmed that oility company or as otherw	e of the registered t the change(s)	d
	ature of a member	KETTELY	JOSEPH		-
I her provi the of to me notifi	eby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely refect a change in the registered office address, I by in virting of this change. CHEVENNE MOSELEY, ASSISTANT SECRETAR STATES CORPORATION AGENTS, INC.	performance of a d for in Chapter hereby confirm to	my duties, and I am familia 605. F.S. Or. if this docum	comply with the with and accept tent is being filed	t
	Division of Cornerations & P.O. I	Dov 6377# 15.00	haman El 20214		

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