## 40000 101121

(	Requesto	or's Name)	_
(,	Address)		
	Address)		
<del> </del>			
(1	City/State	e/Zip/Phone	#)
PICK-UP		WAIT	MAIL
('	Business	Entity Nam	e)
	Docume	nt Number)	
Certified Copies		Certificates	of Status
Special Instructions	to Filing	Officer:	<del></del>

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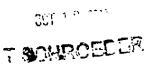


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## COVER LETTER

TO:	Registration Section Division of Corporations		
CUDI	· Por	KRR, LLC	
SUBJ	ECT: Nan	ne of Limite	d Liability Company
Dear :	Sir or Madam:		
The e	nclosed Registered Agent/Registered Off	ice Change	and fee(s) are submitted for filing.
Please	e return all correspondence concerning th	is matter to	the following:
Dona	ald W. Wallis		
	Name of Person		<del></del>
Upch	nurch, Bailey and Upchurch, P.A.		
	Firm/Company		
780	North Ponce de Leon Blvd.		
	Address		<del></del>
St. A	ugustine, Florida 32084		
	City/State and Zip Code		
dwal	lis@ubulaw.com		
	E-mail address: (to be used for future ann	ual report n	otification)
For fu	erther information concerning this matter,	please call:	
Dona	ald W. Wallis	904	<sup>829-9066</sup>
	Name of Person	ar (	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

INHS18 (2/14)

## 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. Na	ame of the limited liability company: KRR, LLC				
2. (a)	_	<i>a</i> ,			
, ,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of I	limited liability compar	ny:
	135 East Davis Industrial Drive, Ste. 1	135	5 East Davis Indus		
	St. Augustine, Florida 32084		Augustine, Florida		<del></del>
	09/27/2010	1 100	000101121		<del></del>
3.	Date of filing/registration in Florida	- 4. <del>- 100</del>	<del></del>		
5. (a)		•	Document num	ber	
` ,	Registered Agent and Registered Office shown on the records of Lori Aldrich	f the Florida Dept.	of State:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	<del></del>		
	780 North Ponce de Leon Blvd.			<b>≨</b> 2	
	St. Augustine, FI	32084	<del></del>	19 S	
	,, ,,	<del></del> -		SEP 26	
(b)	E			26	
	Enter name of NEW Registered Agent and/or NEW Registered	Office address.	<del></del>	-1,	· !T!
	Donald W. Wallis				5
	NEW Registered Office Address:	<del>_</del>	<del></del>	17:57 SAIC 1080	
	780 North Ponce de Leon Blvd.			* 7	
	St. Augustine, FL	32084			
the ling changent wings as/weg	mited liability company is not organized under the law age or changes are made, the Florida street address of all be identical. Or, in the case of a Florida limited lia equathorized by an affirmative vote of the members of the of organization or the operating agreement of the	vs of the State of the registered of ability company of the limited lia limited liability	y, it is hereby confirme ability company or as of company		
	9/201/10	Kelly P. F			
Signatur	re of a member or authorized representative of a member of accept the appointment as registered agent and agent as of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have a supposed to the change.			ne of signee	

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