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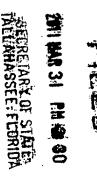
(Re	equestor's Name)	
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C. LEWIS

APR 1 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: KATHARINES by	ARDEN LLC	
Name of Limit	ted Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
LEE MIDERSON		
Name of Person		
KATHARINES LARDEN LL	<u>'</u>	
3054 GORDON DRIVE		
Address		
NATLES, FLORIDA 34/02 City/State and Zip Code	? 	
City/State and Zip Code		
Kathgardenflægmail. (0)	<i>n</i>	
E-mail address: (to be used for future annual report notification)	ation)	
For further information concerning this matter, p	lease call:	
LEE R. ANDERSON at (239, 250-6177	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 32301	rananassee, i fonda 52514	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$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. 1. Name of the limited liability company: KATHARINTS VAK DEN LLC 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: DRIVE (Note: MAY BE POST OFFICE BOX) L11 006030590 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address **NEW** Registered Agent: KATHARINES. VARDEN LLC NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS 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 of a member or authorized representative of a member ANDERSON Printed or typed name of signee

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 608, W.S. Of 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 of Registered Agent