

LI 000138772

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JAN 05 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jan Kinder Center for Health and Well-Being, 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:

Jan Kinder

Name of Person

Jan Kinder Center for Health and Well-Being

Firm/Company

5210 CASA REAL DR.

Address

DELRAY BEACH FL 33484

City/State and Zip Code

jan@jan Kinder center .com

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

For further information concerning this matter, please call:

Jan Kinder

Name of Person

at (561) 510-1022

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 8, 2015

JAN KINDER
5210 CASA REAL DR
DELRAY BEACH, FL 33484

SUBJECT: JAN KINDER CENTER FOR HEALTH AND WELL BEING, LLC
Ref. Number: L11000138772

We have received your document for JAN KINDER CENTER FOR HEALTH AND WELL BEING, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$55.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 415A00025716

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 DEC 31 PM 12:28

FILE

**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: Jan Kinder Center for Health & Well-Being LLC

2. (a) 5210 CASA REAL DR.

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

DELRAY BEACH FL 33484

(b) 5210 CASA REAL DR.

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

DELRAY BEACH FL 33484

3. 12/09/2011
Date of filing/registration in Florida

4. L11000138772
Document number

5. (a) JANET KINDER
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2403 SW 132nd WAY

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

DAVIE, FL 33325

(b) JANET KINDER
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:

5210 CASA REAL DR

DELRAY BEACH, FL 33484

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.

Jan Kinder
Signature of a member or authorized representative of a member

Janet Kinder
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 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.

Jan Kinder
Signature of Registered Agent