

L12000048190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

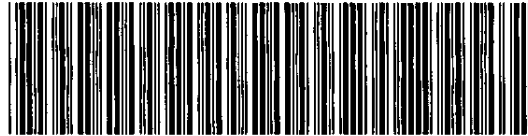
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100272906171

05/18/15--01029--008 **25.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 MAY 18 PM 3:40

MAY 21 2015

T CANNON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ZEN-KG, 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:

TIBOR FEIGEL
Name of Person

ZEN-KG, LLC
Firm/Company

125 VINTAGE ISLE LANE
Address

PALM BEACH GARDENS, FL 33418
City/State and Zip Code

TIBORFEIGEL@ZEN-KG.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KITTI VARGA at (786) 512-8486
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

**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: ZEN-K9, LLC
2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
125 VINTAGE ISLE LANE
PALM BEACH GARDENS, FL 33418
- (b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
125 VINTAGE ISLE LANE
PALM BEACH GARDENS, FL 33418
3. 4/9/12 Date of filing/registration in Florida
4. L12000048190 Document number
5. (a) ABIGAIL WATTS-FITZGERALD
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

777 BRICKELL AVENUE SUITE 850
MIAMI, FL 33131

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

2800 PONCE DE LEON BOULEVARD, SUITE 1400
CORAL GABLES, FL 33134

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 MAY 18 PM 3:40

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

TIBOR FEIGEL
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]
Signature of Registered Agent