

L12000064804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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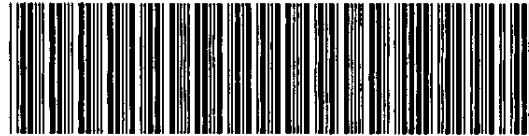
(Business Entity Name)

(Document Number)

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FILED
JUL 2 2013
CLERK OF STATE
TALLAHASSEE, FLORIDA

AUG 05 2013

D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KARL VICKNER 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:

KARL VICKNER
Name of Person

KARL VICKNER LLC
Firm/Company

7528 Rayford St.
Address

Navarre, FL, 32566
City/State and Zip Code

Karl.vickner@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karl Vickner at (850) 238-9677
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 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: Karl Vickner LLC
2. (a) Principal office address of limited liability company: 7528 Rexford St.
(Note: **MUST BE STREET ADDRESS**) Navarre FL 32566

(b) Mailing address of limited liability company: 7528 Rexford St.
(Note: **MAY BE POST OFFICE BOX**) Navarre FL 32566

7-13-2012
3. Date of filing/registration in Florida
L12000064804
4. Document number

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

Registered Agent:

Karl Vickner

Registered Office Address:

9589 Brentwood Blvd
Navarre, FL 32566

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

NEW Registered Agent:

Karl Vickner

NEW Registered Office Address:

7528 Rexford St.

(**MUST BE FLORIDA STREET ADDRESS**)

Navarre FL 32566

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.

Carl P. Vickner
Signature of a member or authorized representative of a member

KARL VICKNER
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, 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 of Registered Agent

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