## L13600005962

(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·		
(Ad	dress)	······································		
(Ad	dress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL.		
(Bu	isiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		!		

Office Use Only



700250228597

08/02/13--01015--009 \*\*125.00

13 AUG -2 AM II: 48
SECRETARY OF STATE
TALLAHASSEE FLORID

## **COVER LETTER**

Division of	f Corporations				
SUBJECT:	Kharma Holdings, LL	.c			
SUBJECT:	Name of	Limited Liab	ility Company		
Dear Sir or Madan	1:				
The enclosed Regi	stered Agent/Registered	Office Change	e and fee(s) are submitted	l for filing.	
Please return all co	orrespondence concerning	g this matter to	the following:		
	Ruth A, Danhires				
	Name of Person	*****	_		
K	íharma Holdings, LLC				
	Firm/Company				
60	03 <b>\$</b> . Honore Ave., Ste. 101				
	Address				
	Sarasota, FL 34238			TAL SE	
<u> </u>	City/State and Zip Code			LAH	
	@Integrityfunding.com			-2 ASSE	
E-mail address: (to	be used for future annual report	notification)	<del></del>		
For further informa	ation concerning this ma	tter, please ca	II:	SIVIE SIVIE	
Ruth A. I	Danhires	at ( 941	) 684-0500	<b>J</b>	
	e of Person	at (	Area Code & Daytime Telepho	ne Number	
Registration Division of Clifton Buil 2661 Execu	Corporations	Ro Di P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 hillahassee, Florida 32314		
Enclosed i	s a check for the follow	ing amount:			
☑ \$25 Filir	ng Fee		S55 Filing Fee & Certifie	5 Filing Fee & Certified Copy	

P

TO: Registration Section

## 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:KI	harma Holdings, LLC
2. (a) Principal office address of limited liability	company 6003. Honore Ave., Ste. 101
(Note: MUST BE STREET ADDRESS)	SArasota, FL 34238
(b) Mailing address of limited liability compar (Note: MAY BE POST OFFICE BOX)	ny: SAANL
January 11, 2013	L13000005902
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sh	nown on the records of the Florida Dept. of State:
Registered Agent:	Ruth A. Danhires
Registered Office Address:	8181 S. Tamiami Trail, Sta. B
	Sarasota, FL 34231
(b) Enter name of <u>NEW Registered Agent</u> an	S TAX SEE STEEL
NEW Registered Agent:	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRE	6003 K Honore Ave, Ste 161
MOST BE I BONDA STREET ADDRESS	,FL
and the business office of the registered agent will liability company, it is hereby confirmed that the c	de, the Florida street address of the registered office be identical. Or, in the case of a Florida limited change(s) was/were authorized by an affirmative vote of sotherwise provided in the articles of organization or
Wendy W. Roper	
Printed or typed name of signee	
I hereby accept the appointment as registered age comply with the provisions of all statutes relative and I am familiar with and accept the obligations Chapter 608, F.S. Or, if this document is being fit address, I hereby confirm that the limited liability	ent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, of my position as registered agent as provided for in led to merely reflect a change in the registered office 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

. . . (