

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)205~8842 Fax Number : (850)878~5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

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<ul> <li>A second sec second second sec</li></ul>				
	COVER L	ETTER		
TO: Registration Section Division of Corporations				
SUBJECT: Kire Enterprises, LLC				
Name o	f Limited Li	ability 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 n	natter to the	following:		
		-		
Paul Edward Ziemba, CPA				
Name of Person				
Life Line Financial Group				
Firm/Company		<del></del>		
829 Cedar Terrace				
Address				
City/State and Zip Code	<u> </u>			
EJManuel@LLFG-us.com E-mail address: (to be used for future annual	report notif	(cation)		
For further information concerning this matter, plo				UVIS 15
	847 at (	)	SEC	SECF
Name of Person		Area Code & Daytime Telephon	ne Number 品	JUN 2
STREET/COURIER ADDRESS:		AILING ADDRESS: gistration Section	SSEE	DF CC
Registration Section Division of Corporations		AW Not		
Clifton Building	P.(	vision of Corporations D. Box 6327	OF ST	α 2 2 2 2 2
2661 Executive Center Circle Tallahassee, Florida 32301	Та	Ilahassee, Florida 32314	F STATE FLORIDA	OF STALE DRPORATIONS AM 8: 16
Enclosed is a check for the following ar	nouot:			

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## 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 Statules, 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.

I. N	ame of the limited liability company:Kire Enterprises	s, LL	.c			<u> </u>	
2. (a)	267 Pearl Street		(b) 267 F	Pearl Street			
.,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)				
	Unit #601		Unit #	601			
	Buffalo, NY 14202		Buffa	lo, NY 14202			
	01/24/13		L1300	0012614			
3.	Date of filing/registration in Florida	4.		Document number			
5, (a	Erik Rodriquez Manuel Jr						
	Registered Agent and Registered Office shown on the records of the 888 Biscayne Blvd Registered Office Address (MUST BE FLORIDA STREET AD Unit #4405			State:	247	15	SEC
	Mlami, FL_3	313	32		ECHET	JUN 2	ON OF
(Ե)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u> NRAI Services, Inc.	llice	address:		ARY OF STATI	6 AM 8: 1	RY OF STATI
	NEW Registered Office Address:				⇒	ማ	- N.
	1200 South Pine Island Road						. 77
	PlantationFLFLFL	333	324				
the ch agent was/v	limited liability company is not organized under the laws tange or changes are made, the Florida street address of it will be identical. Or, in the case of a Florida limited liab vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the li	he re pility the l inite	gistered o company, limited lial	flice and the business of , it is hereby confirmed bility company or as of company.	that the ch	ange(s)	er <del>c</del> a )
Sig	saturdor a member or authorized representative of a member	_		Printed or typed name	e of signee		
I her provi the of to mo notifi	eby accept the appointment as registered agent and agre sions of all statutes relative to the proper and complete p bligations of my position as registered agent as provided rely reflect a change in the registered office address, I he ed in writing of this change.	e lo erfo for i erebj	act in this rmance of in Chapter y confirm (	capacity. I further ogi "ny duties, and I am Ja • 605, F.S. Or, if this d that the limited liability	ree to comp miliar with ocument is v company i	ly with and ac being f has bee	the cept iled m
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Division of Corporations• P.O. Box 6327• Tallabassee, FL 32314 FILING FEE: \$25.00

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