

L13000093718

(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



400259262504

04/29/14--01003--019 **25.00

14 APR 29 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

C. LEWIS
MAY 9 2014
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kara Endres 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:

Kara Endres

Name of Person

Kara Endres LLC

Firm/Company

5306 Reflections Place Court #204

Address

Tampa / FL 33634

City/State and Zip Code

karaedesign@gmail.com

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

For further information concerning this matter, please call:

Kara Endres

954

298-5274

at ()

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: Kara Endres LLC

2. (a) 5306 Reflections Place Court #204 (b) 5306 Reflections Place Court #204

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Tampa / FL 33634

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

Tampa / FL 33634

July 1, 2013

L13000093718

3. Date of filing/registration in Florida

4. Document number

5. (a) Deb Reeves

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Corporation Service Company

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1201 Hays Street

Tallahassee, FL 32301

(b) Kara Endres

Enter name of NEW Registered Agent and/or NEW Registered Office address:

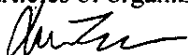
Kara Endres LLC

NEW Registered Office Address:

5306 Reflections Place Court #204

Tampa, FL 33634

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 of a member or authorized representative of a member

Kara Endres

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.



Signature of Registered Agent

APPROVED
AND
FILED
14 APR 29 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA