L13000109410

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	· #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
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COVER LETTER

Registration Section TO: Division of Corporations

K & T of Pensacola, 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:

Kerri Toth

Name of Person

K & T of Pensacola, LLC

Firm/Company

406 Meadowview Terrace

Address

Lynn Haven, FL 32444

City/State and Zip Code

Kerritoth@att.net

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

For further information concerning this matter, please call:

Kerri Toth

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

(850) 245-605V Enclosed is a check for the following amount:

□ \$55 Filing Fee & Certified Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

■ \$25 Filing Fee



, 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.

I. Nar	me of the limited liability company: K&T of Pensacola, LLC		
2. (a) Principal office address of limited liability con (Note: MUST BE STREET ADDRESS) ** (Change)		7175 N Davis Hwy Suite K	
		Pensacola, FL 32504	
(b)	Mailing address of limited liability company:	406 Meadowview Terrace	
(<u>Note: MAY BE POST OFFICE BOX</u>) ** (C/MM)e }		Lynn Haven, FL 32444	
08/02/201		L13000109410	
3. Dat	te of filing/registration in Florida	4. Document number	
5. (a)	Registered Agent and Registered Office shown on	the records of the Florida I	Dept. of State:
	Registered Agent:	Taylor Toth	
	Registered Office Address:	7171 N Davis Hwy Pensacola, FL 32504	
		Pensacola, FL 32504	20 3 5 C 3
(b)	Enter name of NEW Registered Agent and/or NE	W Registered Office add	
	NEW Registered Agent:	Taylor Toth (No change)	SSEE SSEE
NEW Registered Office Address:	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	406 Meadowview Terrace	
(MUST BE FLORIDA STREET ADDRESS)		Lynn Haven	32FU
confir and th liabili the me the op	limited liability company is not organized under the med that after the change or changes are made, the Fue business office of the registered agent will be identy company, it is hereby confirmed that the change(sembers of the limited liability company or as otherwherenting agreement of the limited liability company.	lorida street address of the tical. Or, in the case of a F was/were authorized by a	registered office Florida limited In affirmative vote of
	or typed name of signec	_	
I here compl and I Chap addre	eby accept the appointment as registered agent and ly with the provisions of all statutes relative to the pi am familiar with and accept the obligations of my p ter 608, F.S. Or, if this document is being filed to m ess, I hereby confirm that the limited liability compan	agree to act in this capacit oper and complete perfori osition as registered agent erely reflect a change in th ny has been notified in writ	y. I further agree to nance of my duties, as provided for in e registered office ing of this change.
Signati	Taylor E Jate		

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