L13000118944

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(Address)					
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(Document Number)					
Certified Copies	_ Certificates	of Status			
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SECRETARY OF STATE
ORID

L HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations	•			
SUBJECT: Kamayan's LLC				
Name of I	Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Ch	nange and fee(s) are submitted for filing.			
Please return all correspondence concerning this mat	ter to the following:			
Johnny Saenz				
Name of Person				
Kamayan's LLC				
Firm/Company				
101 S Old Coachman Rd. Apt. 110				
Address				
Clearwater Florida 33765				
City/State and Zip Code				
johnnysaenz1@gmail.com				
E-mail address: (to be used for future annual re	port notification)			
For further information concerning this matter, pleas	se call·			
Johnny Saenz	727 871-7660			
Name of Person	Area Code & Davtime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	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. Na	nme of the limited liability company: Kamayan's L	LC		
			o)	
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Ma	iling address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2350 Cypress Pond Rd. 2503		2350 Cyp	ress Pond Rd. 2503
	Palm Harbor Florida US 34683		Palm Hart	oor Florida US 34683
	August 22, 2013		L13000118	944
3.	Date of filing/registration in Florida			Occument number
5. (a)				
J. (a)	Registered Agent and Registered Office shown on the records o	f the Florid	a Dept. of State:	
	UNITED STATES CORPORATION AGENTS	S. INC		
	Registered Office Address (MUST BE FLORIDA STREET			
	13302 Winding Oak Court, A		 -	
				70 to
	Tampa , F	L 33612		
				SECRETARIASS
(b)	Enter name of NEW Registered Agent and/or NEW Registere			
	Enter name of NEW Registered Agent and/or NEW Registere	d Office a	<u>ldress</u>	
	Johnny Saenz			PH 2: 05
	NEW Registered Office Address:			5 m
	101 S. Old Coachman Rd, 110		-	ŕ
	Clearwater	. _L 33765	į	
the cha agent v was/w the art	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the reg liability of of the ling le limited	istered office a ompany, it is l nited liability liability comp hnny Saenz	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in any.
Signa	ture of a member of authorized representative of a member		Ĭ	Printed or typed name of signee
provisi the obi to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ly reflect a change in the registered office address, and in writing of this change.	gree to ac le perforn led for in I hereby c	ct in this capac nance of my di Chapter 605, confirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been
<u></u>	alinny genry			
Signatu	re of Registered Agent			