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S. WARREN 0CT 0 6 2017

COVER LETTER , g
TO: +Registration Section Division of Corporations
SUBJECT: KD Restaurants 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:
ANDREW L SRANGEN Name of Person
Firm/Company
215 Decra CT
City/State and Zip Code
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

SRAYC at (850) 386 1993

Area Code & Daytime Telephone Number Name of Person

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

INHS18 (2/14)

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

1. Na	ame of the limited liability company: KD Restaul	rants LLC	;				
` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	() <u>\</u>	Mailing address of li	mited liabili	ty com	pany; DXI
	12805 East Highway 98 T 101		12805 E	ast Highway 9			ш
	Inlet Beach, FL 32413	_ _		nch, FL 32413			
	June 24, 2014		L 1400010	00927			
3.	Date of filing/registration in Florida	4.		Document numb	ber		
5. (a)	Kevin R. Flamm						
(-)	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of State	:			
			 -		· -		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS	Ł		至新	17	
	12805 East Highway 98 T 101					000	
	Inlet Beach	_L 32413			S	7	<u> </u>
(b)	Richard Ruch Sr.				7 07 C	AH	E E
	Enter name of NEW Registered Agent and/or NEW Registered	ed Office add	lress:		ANY OF STATE ASSEE, FLORIDA	8: 5 9	
	NEW Registered Office Address:						
	5676 Santa Anita Drive						
	Tallahassee, F	<u>3230</u> 9					
agent w	mited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the regist liability cou cof the limi	mpany, it is	and the business hereby confirme	office of	the re	gistered
	when the day		10 4 A . 2	in Burn	511.		
I hereb provision the oblition to mere notified	ure of a member or authorized representative of a member by accept the appointment as registered agent and as ons of all statutes relative to the proper and complet gations of my position as registered agent as providely reflect a change in the registered office address, it is important to the control of this change.	gree to act le performa led for in C I hereby co.	(Printed of typed nur city. I further as uties, and I am f. F.S. Or, if this he limited liabili	gree to con amiliar wi document ty compan	nply v ith an is bei iy has	with the d accept ng filed been

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