L160000 96690

	(Requestor's Name)			
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
	- ,			
PICK-UI	P WAIT	MAIL		
	(Business Entity Name)			
	(Document Number)			
Certified Copies	Certificates of Stat	us		
Special Instructions to Filing Officer:				

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SECRETARY OF STATE

delace

COVER LETTER

Division of Corporations		
SUBJECT: KP LUXURY ENTERPRISES, LLC		
	ited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	to the following:	
CHERIE A. HANLEY, PARALEGAL		
Name of Person		
ENGLANDER FISCHER		
Firm/Company		SEC TALL
721 FIRST AVENUE NORTH		
Address		HASSEE BLAFY O
ST. PETERSBURG, FL 33701		F STA
City/State and Zip Code		₩ 57
chanley@eflegal.com		,
E-mail address: (to be used for future annual repor	rt notification)	
For further information concerning this matter, please ca	all:	
CHERIE A. HANLEY at (27 898-7210 EXT. 242	
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	

INHS18 (2/14)

FIMILED FIVRIFILA COMPANA

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.

. Na	ame of the limited liability company: KP LUXURY			ONY DRIVE S	OUTH
. (a)	6660 COLONY DRIVE SOUTH	(b	J		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			illing address of limites (Note: MAY BE POS)	
	ST. PETERSBURG, FL 33705		•	RSBURG, FL	
	J. P.		01.1212	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	MAY 17, 2016		L16000096	690	
3.	Date of filing/registration in Florida	4.	1	Document number	
	KASHMIR PARKER				
5. (a)	Registered Agent and Registered Office shown on the records	of the Florid	Deat, of State:		
	3502 HENDERSON BLVD.				i Als
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRES	<u>5)</u>		
	TAMPA,ı	_{FL} 33609			ASSEE ASSEE
(b)	KASHMIR PARKER				25 %
(0)	Enter name of NEW Registered Agent and/or NEW Register	ed Office as	ldress:		ATE 4 57
					7 - 1
		tributed advantage of the second second	rename a sprange service 297 From a		
	NEW Registered Office Address:				
	6660 COLONY DRIVE SOUTH				
	ST. PETERSBURG	FL 33705			
the chagent was/v	limited liability company is not organized under the nange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating autrement of the Machine Parker	of the reg I liability o is of the lit the limited	istered office company, it is mited liability liability com	and the business of hereby confirmed company or as of	office of the registered that the change(s) herwise provided in
	nature of a member or authorized rept			Printed or typed name	ofsignee
I her provide the out to me notific	reby accept the appointment as registered agent and isions of all statites relative to the proper and complebilitations of my position as registered agent as provincely reflect a change in the registered office addressed in writing of this change.	agree to a ete perfon ided for in . I hereby	ct in this cape nance of my t Chapter 605 confirm that i	ncity. I further agr lutles, and I am fai , F.S. Or, if this di the limited liability	ree to comply with the miliar with and accep ocument is being filed ocompany has been
Ka	shmir Parker ture of Registered Agent				

Division of Corporationse P.O. Box 6327e Tailahassee, FL 32314 FILING FEE: \$25.00

INHS18 (2/14)