## L160000 98097

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SECRETARY OF STATE

( 11/4/1/Qc

## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJ	FCT: KP LUXURY CONCIERGE	SERVICE	S, LLC			
50150		e of Limited	d Liability Company			
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Offi	ce Change	and fee(s) are submitted for filing.			
Please	return all correspondence concerning thi	s matter to	the following:			
CHE	RIE A. HANLEY, PARALEGAL					
	Name of Person		<del></del>			
ENG	LANDER FISCHER			ĭ. SE	ō	
<del></del>	Firm/Company				NUL	T
721 1	FIRST AVENUE NORTH			SSE	<u>-</u> -	
	Address			- 194 - 194 - 194	2	$\Box$
ST. F	PETERSBURG, FL 33701				છા છે. કાર્ય	
	City/State and Zip Code				Ψ.	
chan	ley@eflegal.com					
	E-mail address: (to be used for future ann	ual report n	otification)			
For fu	rther information concerning this matter,	please call:				
CHE	RIE A. HANLEY	727	898-7210 EXT. 242			
	Name of Person	_ at (	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)

## 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. N	ame of the limited liability company: KP LUXURY	CONCIERG	E SERVICES, LLC	<b>:</b>	
2. (a)	6660 COLONY DRIVE SOUTH	(b) 666	(h) 6660 COLONY DRIVE SOUTH		
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  ST. PETERSBURG, FL 33705	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  ST. PETERSBURG, FL 33705			
	MAY 19, 2016	L160	00098097		
3. 5. (a)	Date of filing/registration in Florida KASHMIR PARKER	4.	Document num	ber	
(**)	Registered Agent and Registered Office shown on the records of 3502 HENDERSON BLVD.	the Florida Dept.	of State:	SE TAN	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)			
	TAMPA , , FI	33609		SSE F F	
(b)	Enter nume of NEW Registered Agent and/or NEW Registered Office address:			PH 3: 49 FLORIDA	
	YEW Registered Office Address:	e A e galagadh malain e go ann an e e e e e e e e e e e e e e e e	n		
	6660 COLONY DRIVE SOUTH		<del></del>		
	ST. PETERSBURG	_33705			
the chagent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I were authorized by an affirmative vote of the members ticles of organization or the organization and the assuming Parker	of the registered iability compar of the limited l e limited liabili	l office and the busine ny, it is hereby confir liability company or a	ess office of the registered med that the change(s) s otherwise provided in	
" Şiğn	ature of a member or authorized re,ber		Printed or typed a	name of signes	
provis the ob to mei natific	why accept the appointment as registered agent and agent ions of all statutes relative to the proper and completions of my position as registered agent as providing the reflect a change in the registered office address, in the writing of this change.	pree to act in the performance ed for in Chapt hereby confin	ils capacity. I further of my dutles, and I an ter 605, F.S. Or, if th n that the limited liab	agree to comply with the a familiar with and accep is document is being filed ility company has been	
	ure of Registered Agont				

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