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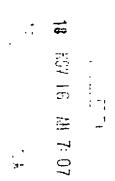
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| Special Instructions to Filing Officer: | | |
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COVER LETTER

| TO: Registration Section Division of Corporations | | | | |
|--|--|--|--|--|
| DUT Partners 11C. | | | | |
| SUBJECT: BKT Partners LLC Name of Limited Liability Company | | | | |
| Name of Entitled Elability 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: | | | | |
| | | | | |
| Kimberly Blanton | | | | |
| Name of Person | | | | |
| BKJ Partners LLC | | | | |
| Firm/Company | | | | |
| 25987 S. Tamiami Trail Unit 97 Address | | | | |
| Address | | | | |
| Ponta Springs FL 34134 City/State and Zip Code | | | | |
| Kim. blanton @ Kitchen solvers. com E-mail address: (to be used for future annual report notification) | | | | |
| For further information concerning this matter, please call: | | | | |
| , | | | | |
| Kimberly Blanton at 941, 564-7262 | | | | |
| Name of Person Area Code & Daytime 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 32314 | | | | |
| Tallahassee, Florida 32301 | | | | |
| Enclosed is a check for the following amount: | | | | |
| \$25 Filing Fee | | | | |

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 Florida.

| 1. N | ame of the limited liability company: BKJ Partners LLC | _ |
|---------------------------------------|--|---|
| | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: UNITY (Note: MAY BE POST OFFICE BOX) | |
| | Bouta Springs FL 34134 Bonuta Springs FL 3413 | 4 |
| | 1/31/2017 L17000025147 | _ |
| 3. | Date of filing/registration in Florida 4. Document number | |
| 5. (a) | Kimberly Blanton | |
| | Registered Agent and Registered Office shown on the records of the Florida Dept. of State: | |
| | BB Vivante Blud Unit 8847 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | |
| | regional of the file of the fi | |
| | runta borda +L 33130 | |
| | Punta Gorda FL FL 33950 | |
| (b) | Kimberly Blanton : 9 | |
| , , | Enter name of NEW Registered Agent and/or NEW Registered Office address: | |
| | 25987 S. Tamame Trail Unit 97 | |
| | NEW Registered Office Address: | |
| | | |
| | Bowla Springs FL 34134 | |
| the chargent was/w the art | imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ange or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in a cless of organization or the operating agreement of the limited liability company. The law of a member or authorized representative of a member Printed or typed name of signee | - |
| provis the ob to mer notifie | by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igutions of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address. I hereby confirm that the limited liability company has been kin writing of this change. The office address are the registered Agent of the confirmal agent of the confirmal agent. The confirmal agent of the confirmal agent of the confirmal agent of the confirmal agent. The confirmal agent of the confirmal | , |