17000/66191

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
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J. W. W

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	KWCH HOLDINGS, LLC		
	Nam	e of Limited Liab	oility Company
Dear S	Sir or Madam:		
The er	nclosed Registered Agent/Registered Off	ice Change and fe	e(s) are submitted for filing.
Please	return all correspondence concerning th	is matter to the fo	llowing:
Kevir	n Schlenker		
	Name of Person		-
KWC	H HOLDINGS, LLC		
	Firm/Company		•
1041	5 BRENTFORD DRIVE		
	Address		-
TAM	PA, FL 33626		
	City/State and Zip Code		-
	n@skaraudio.com		
	E-mail address: (to be used for future ann	ual report notifica	ation)
For fu	rther information concerning this matter,	please call:	
Kevir	Schlenker	727 at (483-8482
	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	Regis Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, 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

KWCH HOLDINGS, LLC	(b) KWCH			HOLDINGS, L	LC	
Principal office address of limited (Note: MUST BE STREE				•	imited liability comp	-
10415 BRENTFORD DRIVI			10415 B	RENTFORD	-	
TAMPA, FL 33626			TAMPA,	FL 33626		
8/4/2017			L1700016	6791		
Date of filing/registration	ı in Florida	4.		Document num	ber	
KWCH HOLDINGS, LLC						
Registered Agent and Registered Office shown on the records of the Florida Dept. of State				• ! :		
SCHLENKER, KEVIN						
Registered Office Address (MUST BI	E FLORIDA STREE	T ADDRE.	<u>SS)</u>	•		
9966 MONTAGUE STREET	Т					
Tampa	I	_L 3362	5	•		
KWCH HOLDINGS, LLC					2018 C TALL	~ ∩
Enter name of <u>NEW Registered Agent</u> a	ind/or <u>NEW Register</u>	ed Office :	ddress:	•	DEC 20	, I
					<u> </u>	
SCHLENKER, KEVIN					77	C
SCHLENKER, KEVIN NEW Registered Office Address:					_ r ~ ~	
	<u> </u>		_	-	PN 3: 13	

the articles of organization or the operating agreement of the limited liability company.

The Albe Kevin Schlenker Signature of a member or authorized representative of a member Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this chapte. All

Signature of Registered Agent