L17000244314

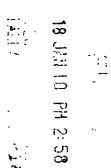
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
wans form

Office Use Only



600306693806

12/18/17--01012--015 ++35.00





December 20, 2017

KATIE BAKER 4110 RANDALL BLVD NAPLES, FL 34120

SUBJECT: KJ AUTO REFINISH LLC

Ref. Number: L17000244314

We have received your document for KJ AUTO REFINISH LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 317A00025717

RECEIVED

JAN 1 1 2018

Please refund \$10.00 For the difference in Filing costs. Thank you.

Kati Baker RAN. BSS

www.sunbiz.org

The second secon

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	KJ Auto Refinish LLC	
	Name o	of Limited Liability Company
Dear Si	r or Madam:	
The end	closed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.
Please r	return all correspondence concerning this r	matter to the following:
Katie I	M Baker	
	Name of Person	
KJ Au	to Refinish LLC	
	Firm/Company	
4110 F	Randall Blvd	
	Address	
Naples	s, Fl. 34120	
	City/State and Zip Code	
kbake	r@fgcu.edu	
E-	mail address: (to be used for future annual	report notification)
For furti	her information concerning this matter, ple	ease call:
Katie E		239 216-6624
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations
	2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314
	Enclosed is a check for the following and \$25 Filing Fee	nount: □ \$55 Filing Fee & Certified Copy
INHS18	already	

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.

ame of the limited liability company: KJ Auto Refir		ish LLC	
4110 Randall Blvd, Naples, Fl. 34	120	(b)	
Principal office address of limited liability (Note: MUST BE STREET ADDR	company:	Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)	
11/29/2017		L17000244314	
Date of filing/registration in Flo	 rida 4.	Document number	
Legalcom Solutions LLC			
Registered Agent and Registered Office shown on	the records of the Florid	da Dept, of State:	
3440 W Hollywood Blvd Suite 415		·	
<u> </u>	<u>IDA STREET ADDRES</u>	<u></u>	
Hollywood	_{FI} 33021	1	
Katie M Baker	, ^	ddress:	
Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office ad	ddress:	
4110 Randall Blvd		daress:	
NEW Registered Office Address:			
Naples	_{EI} 34120)	
	, _{FL} 34120		
limited liability company is not organized u	under the laws of the	e State of Florida, it is hereby confirmed that afficience of the region	
limited liability company is not organized using or changes are made, the Florida stree will be identical. Or, in the case of a Florida	under the laws of the et address of the regi da limited liability co	e State of Florida, it is hereby confirmed that affi istered office and the business office of the region company, it is hereby confirmed that the change	
limited liability company is not organized using or changes are made, the Florida stree will be identical. Or, in the case of a Florida	under the laws of the et address of the region labeled limited liability of members of the limited lim	e State of Florida, it is hereby confirmed that affistered office and the business office of the region company, it is hereby confirmed that the change mited liability company or as otherwise provided	

Signature of Registered Agent