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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Kamakura Capital 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:					
Jennifer Coundlact  Name of Person					
Kamakura Capital LLC Firm/Company					
4271 Graceful Court					
Gulf Breeze Fl 32563 City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Tennifer Gundlach at (352, 299-7080)  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 & 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 Florida.

1. N	fame of the limited liability company:kamak	ura Car	oital LC		
2. (a)	4271 Grace Pul Court	(b)	Same as a	office ada	Liess
	Principal office address of limited liability company:	_ (9)	Mailing address of lin	nited liability compa	ıny:
	Gulf Breeze, F1 32563	<del>-</del>	( <u>Note: MAY BE P</u>	OST OFFICE BOX	<i>-</i>
	2/28/18		1800005		
3.	Date of filing/registration in Florida	4. 	Document numb	er	
5. (a)		Hents,			
	Registered Agent and Registered Office shown on the records of the	he Florida Dept. of	State:		
	13302 Winding Oak	Court			
	Registered Office Address (MUST BE FÉORIDA STREET A.	<u>DDRESS)</u>		. A.	
			<del></del>	2018 SEC	
	ampa FL	33612	<u>)                                    </u>	APR RETA	77
	Time Tollar A	1/ ./		AN TO	
(b)		rundlau	<del></del>	के की <sub>किस</sub> े	L
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>				
	4271 Graceful Court				
	NEW Registered Office Address:		<del></del>	<b></b>	
	_ (Juli Breeze				
		0 - 1	<b>-</b>		
	, FL	3256	<u>5</u>		
the cha agent was/w the art	limited liability company is not organized under the law ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the limited liability.	the registered of bility company, f the limited liab limited liability of	fice and the business it is hereby confirme oility company or as o company.	office of the reg ed that the change otherwise provide	gistered e(s)
<u>*</u>		Ron	INIE 6 UN L	1LACH	
-	nture of a member or authorized representative of a member				سالم ملعت
I nere provisi the obi to mer notifie	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.			ree to comply w amiliar with and document is bein ty company has l	ith the accept g filed Seen
Signatu	of Registered Agent Jennice De Stefani.	s-Gundlat	M		
	Division of Corporations P.O. Be				

FILING FEE: \$25.00