6/17/2019

## Department of State Division of Corporations

**Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000188821 3)))



H190001888213ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: REGISTERED AGENTS INC. Account Name

Account Number : I20090000081 Phone

: (307)200-2803

Fax Number

: (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	
-------	----------	--

## LLC REGISTERED AGENT CHANGE **KEZLIN & COMPANY LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

D SCOTT

JUN 1 8 2019

Electronic Filing Menu Corporate Filing Menu

Help

## 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: Kezlin & C	Company L	LC		
	OLEO DOINT MEADOWS DD	(b) 8150 POINT MEADOWS DR.			
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	UNIT 1003	UNIT 1003			
	JACKSONVILLE, FL 32256	JACKSONVILLE, FL 32256			
	06/15/2018	L18000147972			
3.	Date of filing/registration in Florida	4.	Document number		
5 (0	, UNITED STATES CORPORATION AGENTS	S, INC.	E. K		
5. (a	Registered Agent and Registered Office shown on the records of t	<del> </del>	ALL AHA	77	
	13302 WINDING OAK COURT		ALLAHASSE		
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)	SSE 1	, רוו	
	Α			FILED	
	TAMPAFL	33612	3. 5 12. 5 13. 5 13. 5		
(b	Registered Agents Inc.	Office address			
	Enter name of NEW Registered Agent and/or NEW Registered	Office and ess			
	7901 4th St N				
	NEW Registered Office Address.		•		
	STE 300		-		
	St. Petersburg, FL	33702	_		
the clagent	limited liability company is not organized under the laviange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the registered office ability company, it i of the limited liabilit	s hereby confirmed that the char y company or as otherwise prov	ngc(s)	
Sie	nature of a member or authorized representative of a member	Tricy r dire	Printed or typed name of signee		
I her provi the o to me natif	why accept the appointment as registered agent and agissions of all statutes relative to the proper and complete bligations of my position as registered agent as provide welly reflect a change in the registered office address. I led in spriting of this change.	ree to act in this cap performance of my d far in Chapter 60, hereby confirm that at Secretary	acity. I further agree to comply duties, and I am familiar with a 5, F.S. Or, if this document is b the limited liability company ho	with the accept eing filed is been	
Signa	nure of Registered Agent				

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