Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

LLC REGISTERED AGENT CHANGE KB NAPLES INVESTORS L.L.C.

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Electronic Filing Menu Corporate Filing Menu

Help

Page: 4 of 4

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: KB NAPLES INV | | | | |
|--------------------------------------|--|---|--|---|--|
| 2. (a) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | (0) | Mailing address of limited fiability com | | |
| | 3400 E. LAFAYETTE | | DETROIT, MI 48207 | | |
| | DETROIT, MI 48207 | | | | |
| | 03/19/2020 | L | 20000089821 | | |
| 3. | Date of filing/registration in Florida | 4. | Document number | | |
| 5. (a) | CORPORATION SERVICE COMPANY | | | | |
| (b) | Registered Agent and Registered Office shown on the records of the Florida Dept. of State: | | | | |
| | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | | |
| | 201 HAYS STREET | | | 2 | |
| | TALLAHASSEE , FE | 32301 | | <u>자</u> | |
| | C T Corporation System | | in St. | - A 0 ! : | |
| | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : | | Ess: | 7 NOV -8 PM 12: 33 | |
| | | | | 12: | |
| | NEW Registered Office Address: | | | ယ | |
| | 1200 South Pine Island Road | | | | |
| | Plantation , FL | 33324 | | | |
| the ch agent was/w the art | limited liability company is not organized under the lay ange 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 incles of organization or the operating agreement of the mutic of a member of authorized representative of a member | ws of the S the registe ability con | tate of Florida, it is hereby confirmed that ered office and the business office of the inpany, it is hereby confirmed that the charged liability company or as otherwise proving | registered age(s) | |
| I here provis the ob to men | cby accept the appointment as registered agent and agreems of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address I address I are to the resident as provide reflect a change in the registered office address I are to the resident as provide reflect a change in the registered office address I are to the registered of the resident as a change. | performat d for in Ch hereby con | a this connects. I bother ourse to comply | with the nd accept sing filed s been | |