LZ1 000020312

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(122	,	
· (City/	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busi	iness Entity Nar	me)
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(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



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COVER LETTER

FO: Registration Section Division of Corporations						
SUBJECT: F	roject	K2,LLC				
		Name of Limited Li	ability Company			
Dear Sir or Madam:						
The enclosed Register	ed Agent/Registe	red Office Change and t	fee(s) are submitted for filing.			
Please return all corre	spondence concer	ming this matter to the f	following:			
Knis	ten Lar	129				
· · · · · · · · · · · · · · · · · · ·	Name of Perso	n	_			
Proje	C+ K2,	LLC	<u> </u>			
	Firm/Company	•				
68221	2nd Ave	N #329				
	Address					
St. Peter	sloving, F	L33710	<u> </u>			
C	ity/State and Zip	Code				
E-mail address:	X24@ Cr	ture annual report notific	cation)			
For further informatio						
Kristen	Lanza	at (727	804-6338			
Name	of Person		Area Code & Daytime Telephone Number			
Mailing Add			Street Address:			
Registration			Registration Section			
Division of C P.O. Box 632	•		Division of Corporations The Centre of Tallahassee			
Tallahassee.			2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclosed is a	check for the fol	llowing amount:				
\$25 Filing	Fee	□ \$5	☐ \$55 Filing Fee & Certified Copy			

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. Nan	ne of the limited liability company: Project	* K	L, LLC		
2. (a)	1000 00 of A 0 h 1			2nd Aven	
` / _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	·	Mailing add	dress of limited liability company: MAY BE POST OFFICE BOX)	_
	#329		#329		
	St. Petersburg, FL 33710		st. Peter	rsburg, FL 337	1(
	01/07/24	ı	210000	20312	
3.	Date of filing/registration in Florida	4.	Docume	ent number	_
5. (a) _	Lanza, Kristen				
j	Registered Agent and Registered Office shown on the records of the	: Florida De	ot, of State:		
	118 66th ST N				
	Registered Office Address (MUST BE FLORIDA STREET AD	ODRESS)		202	
				OI NUL INNESSE	
	St. Retersburg .FL	337	HO_		
)				
(b) _	inter name of NEW Registered Agent and/or NEW Registered O	ffice addre		PM 1: 37	
'	Anter Hame of Staw Registered Agent and/or Staw Registered O	riice addres	<u></u>	$\frac{Q_{ij}}{\omega_{ij}}$ $\frac{\pi}{\omega_{ij}}$	
	6822 22nd Ave N			7	
	NEW Registered Office Address:		-		
	# 329		<u>.</u>		
	St. Petersburg .FL	337	10		
change of agent with was/wer	nited liability company is not organized under the laws or changes are made, the Florida street address of the reill be identical. Or, in the case of a Florida limited liabile authorized by an affirmative vote of the members of the operating agreement of the line.	egistered o ility comp the limited mited liab	ffice and the bus any, it is hereby of I liability compar lity company.	siness office of the registered confirmed that the change(s) my or as otherwise provided in	le
Signatu	re of a member or authorized representative of a member	Kr	isten L	anzo or typed name of signee	_
I hereby provisió the oblig to merel notified	y accept the appointment as registered agent and agree ns of all statutes relative to the proper and complete pe gations of my position as registered agent as provided f by reflect a change in the registered office address. I her in lyrating of this change.	to act in .	this canacity. I fi	further agree to comply with the	, pr f
/					