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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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 **KZ 731 LLC**

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

[_] { | 2.23

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. 8	lame of the limited liability company: KZ 731 LLC			
2. (a)	7901 4th St N STE 300	(b) 7901 4th St N STE 300		
* '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	St. Petersburg FL 33702	St. P	etersburg FL 33702	
•	06/22/2021		0289118	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a) <u>Vanessa, Calhoun</u>			
. ,	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State:	
	155 OFFICE PLAZA DRIVE 1ST FLOOR Registered Office Address (MUST BE FLORIDA STREET)	anaperes		
	Registered Office Address [MOST BE FLORIDA STREET A	(DDKESS)	??	
	TALLAHASSEE , FL	32301		
			·	
(b)	Registered Agents Inc		<u> </u>	
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	÷	
			>	
	7901 4th St N			
	NEW Registered Office Address:			
	STE 300			
	St. Petersburg , FL	33702		
	,10			
If the	limited liability company is not organized under the lay	s of the State	of Florida, it is hereby confirmed that after	
the ch	ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia	the registered	office and the business office of the registered	
was/w	ere authorized by an affirmative vote of the members o	f the limited li	ability company or as otherwise provided in	
the an	ticles of organization or the operating agreement of the	limited liabilit	y company.	
	Barbara Grandy	Robin Jone	5	
Sign	ature of a member or authorized representative of a member	110011100110	Printed or typed name of signee	
I here provis the ob to men notific	ely accept the appointment as registered agent and agraions of all statutes relative to the proper and complete 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.		s capacity. I further agree to comply with the f my duties, and I am familiar with and accept r 605, F.S. Or, if this document is being filed that the limited liability company has been	
David	David Roberts - Assistant Se	cretary		
	of Registered Agent			