

L21000300623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

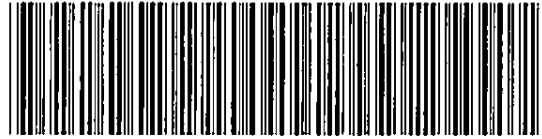
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RA office Change

JAN 25 2024

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: KSA&U Consulting LLC
Name of Corporation

DOCUMENT NUMBER: L21000300623

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kelley M Faulk

Name of Contact Person

KSA&U Consulting LLC

Firm/Company

5005 Maxwell Circle #102

Address

Naples FL 34105

City/State and Zip Code

ksaanduconsultingllc@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kelley M Faulk

at (703) 919-5526
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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2024 JAN 17 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 7, 2023

KELLEY M FAULK
KSA&U CONSULTING LLC
5005 MAXWELL CIRCLE #102
NAPLES, FL 34105

SUBJECT: KSA&U CONSULTING, LLC
Ref. Number: L21000300623

We have received your document for KSA&U CONSULTING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Operations Manager A

Letter Number: 023A00027887

JAN 17 2024

**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. Name of the limited liability company: KSA & U Consulting LLC
2. (a) 5005 Maxwell Circle #102 Naples FL 34105 (b) POB 111994 Naples FL 34108
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 6/29/2016 FL- 6/25/2021 4. L21000300623
Date of filing/registration in Florida Document number

5. (a) Kelley M Faulk
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5935 Premiere Way #1345
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Naples, FL 34109

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

5005 Maxwell Circle #102
NEW Registered Office Address:

Naples, FL 34105

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Kelley M Faulk
Signature of a member or authorized representative of a member

Kelley M Faulk
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Kelley M Faulk
Signature of Registered Agent