12200044908

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2024 APR 24 - AM11: 28

COVER LETTER

	:		0012			
TO:	Regi	Registration Section Division of Corporations				
SUBJECT:		K & S INVESTMENT PROPERTIES LLC				
301001	ECT.	Name of Limited Liability Company				
Dear S	ir or N	∕ladam:				
The en	closed	Registered Agent/Registered Offic	ce Change a	nd fee(s) are submitted for filing.		
Please	return	all correspondence concerning this	; matter to th	ne following:		
SHAN	E BEL	SON				
		Name of Person		_		
K & S	INVE	STMENT PROPERTIES LLC				
		Firm/Company				
6135 G	GULL I	HARBOR DR NE				
		Address	<u> </u>			
OLYM	IPIA. V	VA 98506				
		City/State and Zip Code				
msbels	on@ho	otmail.com				
E	-mail	address: (to be used for future annu	al report no	tification)		
For fur	ther in	nformation concerning this matter, p	olease call:			
SHAN	E BEL	SON	360 at (480-9105)		
		Name of Person	(Area Code & Daytime Telephone Number		
	Regi Divi P.O.	ling Address: istration Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Encl	osed is a check for the following a	ımount:			
	S \$2	25 Filing Fee	□ \$55 Filing Fee & Certified Copy			

INHS18 (2/14)

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: K & S INVESTME	NT PROPER	RTIES, L.L.C.
2. (a	6135 Gull Harbor Drive NE	(b)	6135 Gull Harbor Drive NE
(-	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Olympia, WA 98506		Olympia, WA 98506
	02/07/22	L.22	2000044908
3.	Date of filing/registration in Florida	4.	Document number
5. (a) Stuart E Goldberg		
J. (Registered Agent and Registered Office shown on the records of	the Florida De	ppt. of State:
	2039 Centre Pointe Blvd, Ste 201		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		2
			E 1. 2024 APR 24
	Tallahassee	32308	APR 24
(\t	Registered Agents Inc Enter name of NEW Registered Agent and/or NEW Registered 7901 4th St N		
	NEW Registered Office Address:		<u> </u>
	STE 300		
	St. Petersburg, FL	33702	
the cagen was/	e limited liability company is not organized under the law hange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lia- were authorized by an affirmative vote of the members of rticles of organization or the operating agreement of the	the register ability comp of the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in
	MsBrlsm		M. Shane Belson
Sig	nature of a member or authorized representative of a member		Printed or typed name of signee
provi the o to me	reby accept the appointment as registered agent and agrisions of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the registered office address, I hely writing of this change.	ree to act in performanc d for in Cha hereby conf	this capacity. I further agree to comply with the se of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed irm that the limited liability company has been

- Assistant Secretary

David Roberts

Signature of Registered Agent