

L220000310392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

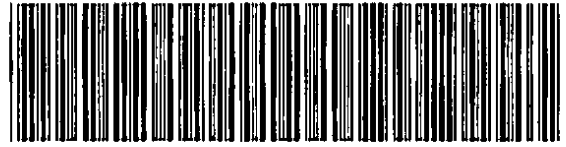
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL
CLERK OF DISTRICT COURT

COVER LETTER

TO: . Registration Section
Division of Corporations

SUBJECT: Kaallen Property Rental LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karen Allen
Name of Person

Kaallen Property Rental LLC
Firm/Company

14273 86th RD N
Address

Loxahatchee FL 33470

allenkaren64@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person _____ at (501) 255-9553
Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 11 03 PM 2:21

November 4, 2022

KAREN ALLEN
14273 86TH RD N
LOXAHATCHEE, FL 33470

SUBJECT: KAALLEN PROPERTY RENTAL LLC
Ref. Number: L22000310392

We have received your document for KAALLEN PROPERTY RENTAL LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 922A00024809

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: Kaallen Property Rental LLC
2. (a) 14273 86th RD N Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Loxahatchee FL 33470
(b) 14273 86th RD N Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Loxahatchee FL 33470

3. 7/18/22 Date of filing/registration in Florida
4. L22000310392 Document number

5. (a) Legal Corp Solutions LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
3440 W Hollywood Blvd Suite 415
Registered Office Address (Note: **MUST BE FLORIDA STREET ADDRESS**)

Hollywood FL 33021
FL

(b) Karen Allen
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

14273 86th RD N
NEW Registered Office Address:
Loxahatchee FL 33470
FL 33470

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.

[Signature]
Signature of a member or authorized representative of a member

Karen Allen
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.

[Signature]
Signature of Registered Agent

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2022 NOV 29 AM 8:28
STATE OF FLORIDA
TALLAHASSEE, FL