MU50000000328

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(De	ocument Number)	
(D(ocament (vaniber)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filtra Officer:	
/	(1/	
)//	,
1 //	\cup	

Office Use Only



100106142451

RECEIVED



ACCOUNT NO. : 072100000032 REFERENCE : 022461 5124579 AUTHORIZATION : COST LIMIT ORDER DATE : July 23, 2007 ORDER TIME : 12:06 PM ORDER NO. : 022461-020 CUSTOMER NO: 5124579 CHANGE OF AGENT NAME: KPC SARASOTA DEVELOPMENT LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
PLAIN STAMPED COPY CONTACT PERSON: Heather Chapman

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limite	d liability company	is: <u>KPC</u> SARAS	OTA DEVELOPME	NT LLC		
2. The mailing address of the limited liability company is:						
1601 Forum Place, Suite 805, West Palm Beach, FL 33401						
01/21/2005			M05000000328			
3. Date of filing/registration in Florida			4. Document number			
5. The name of the register Florida Department of S		gistered office a	ddress as shown o	on the records of the		
	Valdes-Fau	ili Corporate Servi	ces, Inc.	710 O		
		Name				
	777 South F	lagler Drive, Suite	500 East	PE E M		
		Address		FO I		
West Palm Beach, FL 33401						
		y, State and Zip		Fig. 3 III		
6. The name and address of the new registered agent and/or office:						
	Corpora	tion Service Comp	any	16 ORID		
		Name		P		
1201 Hays Street						
Florida street address (P.O. Box NOT acceptable)						
	Tallahassee	FL	32301			
	City,	State and Zip				
If the limited liability com confirmed that after the chand the business office of liability company, it is her of the members of the lim or the operating agreemen (Signature of a member or authority)	tange or changes are the registered agent to the confirmed that the companies of the limited liability companies of the limited liability.	made, the Flori will be identica he change(s) was otherwing company.	da street address of l. Or, in the case of as/were authorized	of the registered office of a Florida limited I by an affirmative vote		
michael	Clarke					
(Printed or typed name of signee)						
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm	ntment as registered s of all statules relative accept the obligation is document is being that the limited liabi	agent and agre ive to the prope ons of my positi g filed to merely lity company ha	e to act in this cap r and complete pe on as registered a v reflect a change as been notified in	pacity. I further agree to rformance of my duties, gent as provided for in in the registered office writing of this change.		
(Signature of Registered Agent)	nichelle R. Vannoy, Asst	. Vice President				

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00