

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M05000003628

Entity Name: K4 ARCHITECTURE, LLC

FILED  
Oct 09, 2007  
Secretary of State

## Current Principal Place of Business:

4300 W. CYPRESS STREET, SUITE 150  
COLONIAL PLACE I  
TAMPA, FL 33607

## New Principal Place of Business:

## Current Mailing Address:

4300 W. CYPRESS STREET, SUITE 150  
COLONIAL PLACE I  
TAMPA, FL 33607

## New Mailing Address:

FEI Number: 04-3596085      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

DEWITT MILLARD, STEPHEN  
4618 BEACH PARK DRIVE  
TAMPA, FL 33629      US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: STEPHEN DEWITT MILLARD

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: KLUMP, JEFFRY C  
Address: 555 GEST STREET  
City-St-Zip: CINCINNATI, OH 45203

Title: MGRM ( ) Delete  
Name: POSEY, RICHARD S  
Address: 555 GEST STREET  
City-St-Zip: CINCINNATI, OH 45203

Title: MGRM ( ) Delete  
Name: HATFIELD, P. LAWRENCE  
Address: 555 GEST STREET  
City-St-Zip: CINCINNATI, OH 45203

Title: MGRM ( ) Delete  
Name: SCHAEFER, JOHN A  
Address: 555 GEST STREET  
City-St-Zip: CINCINNATI, OH 45203

Title: MGRM ( ) Delete  
Name: NOELL, DAVID K  
Address: 555 GEST STREET  
City-St-Zip: CINCINNATI, OH 45203

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JEFFRY C KLUMP

MGRM

10/09/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date