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Florida Department of State
Division of Corporations
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Email Address: Cynthia.Carlson@Kernan.com

LLC REGISTERED AGENT CHANGE
KOESTNER FAMILY, LLC

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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. Name of the limited liability company: KOESTNER FAMILY, LLC

2. (a) Principal office address of limited liability company: _____

(Note: MUST BE STREET ADDRESS)

134 GARDEN DRIVE
KALISPELL MT 59901

(b) Mailing address of limited liability company: _____

(Note: MAY BE POST OFFICE BOX)

134 GARDEN DRIVE
KALISPELL MT 59901

3. Date of filing/registration in Florida 09/09/2009 4. Document number M09000003566

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

Registered Agent: CYNTHIA CARLSON ESQ

Registered Office Address: 1185 IMMOKALEE ROAD SUITE 146
NAPLES FL 34110 US

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

NEW Registered Agent: NRAI Services, Inc.

NEW Registered Office Address: 515 East Park Avenue

(MUST BE FLORIDA STREET ADDRESS) Tallahassee FL 32301

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 of a member or authorized representative of a member

BUDY KOESTNER, MGR.
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 608, F.S. On 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.

by: NRAI Services, Inc.
Signature of Registered Agent

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

FILING FEE: \$25.00