

M110000004455

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Kinetic Strategic Group, LLC
Name of Corporation

DOCUMENT NUMBER: M11000004455

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Williams

Name of Contact Person

Kinetic Strategic Group, LLC

Firm/Company

1800 2nd Street, Suite 955

Address

Sarasota, FL 34236

City/State and Zip Code

michael.williams@kinetic-sg.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Williams

Name of Contact Person

at (941) 870-9544

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
13 DEC -2 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 20, 2013

MICHAEL WILLIAMS
1800 2ND STREET
SUITE 955
SARASOTA, FL 34236

SUBJECT: KINETIC STRATEGIC GROUP, LLC
Ref. Number: M11000004455

We have received your document for KINETIC STRATEGIC GROUP, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jeraline Saulsberry
Regulatory Specialist II

Letter Number: 113A00025385

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: KINETIC STRATEGIC GROUP, LLC

2. (a) Principal office address of limited liability company: 1800 2nd St, Ste 955 SARASOTA, FL 34236 (Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

3. Date of filing/registration in Florida: 9/2/2011

4. Document number: M11000004455

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

Registered Agent: NATIONAL CORP RESEARCH

Registered Office Address: 155 OFFICE PLAZA DRIVE TALLAHASSEE, FL 32301

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

NEW Registered Agent: MICHAEL WILLIAMS

NEW Registered Office Address: 1800 2nd St. Ste 955 SARASOTA, FL 34236 (MUST BE FLORIDA STREET ADDRESS)

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

MICHAEL WILLIAMS

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. 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 of Registered Agent

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

FILED 03 DEC -2 PM 12:00 SECRETARY OF STATE TALLAHASSEE, FLORIDA