

M 14 0000008331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

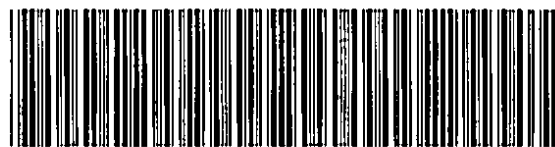
(Document Number)

Certified Copies \_\_\_\_\_

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OCT 29 P 6:38

10/31/18 DS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 27, 2018

WES COLLINS  
12157 W LINEBAUGH AVE #172  
TAMPA, FL 33626

SUBJECT: K & R MANAGEMENT RESOURCES, LLC  
Ref. Number: M14000008331

We have received your document for K & R MANAGEMENT RESOURCES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FL LLC, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

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.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 218A00020201

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2018 OCT 2 PM 3:13  
11-11-18  
11-11-18

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: **K & R Management Resources, LLC**

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Wes Collins**

Name of Person

**K & R Management Resources, LLC**

Firm/Company

**31201 US Highway 19N, Suite 3**

Address

**Palm Harbor, FL 34684**

City/State and Zip Code

**wc@krmresources.com**

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

For further information concerning this matter, please call:

**Wes Collins**

Name of Person

**570**

Area Code

**850-1912**

Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

CR2E062 (9/15)

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**STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

**FIRST:** The name of the limited liability company is: K & R Management Resources, LLC

**SECOND:** The Florida Document number of the limited liability company is: M14000008331

**THIRD:** Document to be corrected is: Application by Foreign LLC for Authorization to Transact Business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The incorrect statement is: 47-4877525 FEI number. The reason the statement is incorrect was due to the copying of an incorrect EIN into the application.

The correct EIN number is 47-2191644

**OR**

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

- ☐ The electronic transmission of the record was defective.

W. Cal 10/25/18  
Signature of Authorized Representative Date

Signature of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

**New Registered Agent's Signature, if changing Registered Agent:**

*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.*

\_\_\_\_\_  
Registered Agent's Signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)