## M16000006373

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## ` COVER LETTER

TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations			
SUBJ	AEP CHARTER KCC II, LLC			
	Name of Limited Liability Company			
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Registered Off	ice Change at	nd fee(s) are submitted for filing.	
Please	return all correspondence concerning th	is matter to th	e following:	
LOR	ETTA A. MCCOOL			
	Name of Person		<del></del>	
UNIS	SEARCH, INC.			
	Firm/Company			
325	13TH ST. SUITE 404			
	Address			
SALE	EM, OR 97301			
	City/State and Zip Code		<del>_</del>	
UNIS	OP@UNISEARCH.COM			
F	E-mail address: (to be used for future ann	ual report no	tification)	
For fu	rther information concerning this matter,	please call:		
LORI	ETTA A. MCCOOL	800 at (	554-3113	
	Name of Person		Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	F [ ]	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Callahassee, Florida 32314	
	Enclosed is a check for the following	amount:		
	☑ \$25 Filing Fee		\$55 Filing Fee & Certified Copy	

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

I. Name of the limited liability company: AEP CHARTER KCC II, LLC					
		(b)			
,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	222 SW COLUMBIA ST. SUITE 1750		222 SW COLUMBIA ST. SUITE 1750		
	PORTLAND, OR 97201		PORTLAND, OR 97201		
	08/10/2016	N	M16000006373		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a	)				
<i>5.</i> (u	Registered Agent and Registered Office shown on the records of	the Florida D	Dept. of State:		
	C T CORPORATION SYSTEM				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	<u></u>		
	1200 SOUTH PINE ISLAND ROAD		ave m		
	PLANTATION	33324	SEP 22 PM 7		
	, , ,	<u> </u>			
(b)					
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office addr	Iress:		
	UNISEARCH, INC.		FILLED  TO SEP 22 PM 7: 18  BIVISION OF CORPURATIONS  BIVISION OF CORPURATIONS		
	NEW Registered Office Address:	<del></del>			
	155 OFFICE PLAZA DR.				
	TALLAHASSEE, FL	32301			
the cha agent was/w the art	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registe ability com of the limite limited lia	tered office and the business office of the registered mpany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in ability company.		
	CINDY CAGGIANO, AUTHORIZED PERSON autre of a member or authorized representative of a member	CIND	DY CAGGIANO		
_	·	ran ta nat iv	Printed or typed name of signee		
provis. The obi to mer	by accept the appointment as registered agent and agrifons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I is din writing of this change.	performan d for in Cha hereby conj	nce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been		
<del>り</del> ひ	Statement Buggest OSSE. Secure of Registered Agent	cretar	ry		

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