P97000106046

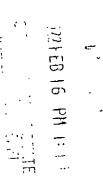
(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	e)
(Document Number)		
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COVER LETTER

TO: Amendment Section Division of Corporations	
• •	•
SUBJECT: Change of Registered Agent for KDJ GP, INC. Name of Corporation	
DOCUMENT NUMBER: P97000106046	
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Jeffery Neuber	
Name of Contact Person	
KDJ GP, Inc.	
Firm/Company	
7320 McGinnis Ferry Road	
Address	
Suwanee, Georgia 30024	
City/State and Zip Code	
jneuber@network21.com	
E-mail address: (to be used for future annual report	t notification)
For further information concerning this matter, please ca	all:
Jeffery Neuber	at (⁷⁷⁰) ⁶²²⁻²¹²¹
Name of Contact Person	at (770)622-2121 Area Code & Daytime Telephone Number
Evaluated in a \$25,00 about made roughle to the Donard	

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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ci	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this hange is submitted for a corporation organized under the laws of the State of Florida der to change its registered office or registered agent, or both, in the State of Florida.	
1. The name o	of the corporation: KDJ GP, Inc.	
	al office address: 7320 McGinnis Ferry Road, Suwanee, GA 30024	_
3. The mailing	g address (if different): Same	<u> </u>
4. Date of inco	f incorporation/qualification: 12/17/1997 Document number: P97000106046	
5. The name a	and street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)	
	CORPORATION SERVICE COMPANY	
	1201 HAYS STREETTALLAHASSEE, FL 32301	œ
6. The name a (if changed)	and street address of the new registered agent (if changed) and /or registered office	
	4850 Sherry Lane	
	P.O. Box NOT acceptable	
	Ft Meyers, FL 33908	
The street add	lress of its registered office and the street address of the business office of its registered age ill be identical.	nt,
Such change authorized by	was authorized by resolution duly adopted by its board of directors or by an officer so the change. 7	
X	Jeffery Neuber, President Printed or typed name and title	_
I hereby angel I further dere of my duties, a document is b	pt the appointment as registered agent and agree to act in this capacity. The two comply with the provisions of all statutes relative to the proper and complete performa and I am familiar with and accept the obligation of my position as registered agent. Or, if the performance in the registered office address. I hereby confirm that the being filed merely to reflect a change in the registered office address. I hereby confirm that the being filed in writing of this change.	nce his the
x OOn	Show x 2/14/2022	
/——— <u> </u>	Signature of Registered Agent Date	
If signing on b	behalf of an entity:	
KNIG	P. Inc.	
	Typed or Printed Name	

* * * FILING FEE: \$35.00 * * *