

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000017036

Entity Name: KV, LLC

Current Principal Place of Business:

2900 NW 165TH STREET
CITRA, FL 32113

Current Mailing Address:

2900 NW 165TH STREET
CITRA, FL 32113

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VERVILLE, JANET
2900 NW 165TH STREET
CITRA, FL 32113 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name VERVILLE, KIMBERLY
Address 2900 NW 165 STREET
City-State-Zip: CITRA FL 32113

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KIMBERLY VERVILLE

MGR

04/03/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date