## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000142156

Entity Name: K&L FACTORING LLC

**Current Principal Place of Business:** 

343 NW COLE TERRACE SUITE 201 LAKE CITY, FL 32055

## **Current Mailing Address:**

343 NW COLE TERRACE SUITE 201 LAKE CITY, FL 32055

FEI Number: 46-3839249 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

KEEN LINTON LLC 343 NW COLE TERRACE SUITE 201 LAKE CITY, FL 32055 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

FILED Feb 27, 2014

**Secretary of State** 

CC4395806513

## Authorized Person(s) Detail:

Title MGRM Title MGRM

Name LINTON, MICAH Name KEEN, KEVIN

Address 343 NW COLE TERRACE SUITE 201 Address 620 W HOWARD STREET

City-State-Zip: LAKE CITY FL 32055 City-State-Zip: LIVE OAK FL 32064

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: MICAH LINTON MGRM 02/27/2014