

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000059680

**Entity Name:** KARI KLEIN, PLLC

**Current Principal Place of Business:**

6549 SEAGATE AVE.  
SARASOTA, FL 34231

**Current Mailing Address:**

6549 SEAGATE AVE.  
SARASOTA, FL 34231 US

**FEI Number:** 82-4745325

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KOONTZ, JO ANN M  
1613 FRUITVILLE RD.  
SARASOTA, FL 34236 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            AMBR  
Name            KLEIN, KARI  
Address        6549 SEAGATE AVE.  
City-State-Zip: SARASOTA FL 34231

*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:** KARI KLEIN

**AUTHORIZED MEMBER**

**04/28/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date