

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

610437

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To: Division of Corporations  
 Fax Number : (850)617-6380

From: Account Name : CAPITOL CORPORATE SERVICES, INC.  
 Account Number : 120160000048  
 Phone : (800)345-4647  
 Fax Number : (800)432-3622

SECRETARY OF STATE  
TALLAHASSEE, FL

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

REGISTERED AGENT CHANGE  
KAUFF'S OF MIAMI, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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Corporate Filing Menu

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: KAUFF'S OF MIAMI, INC.
- 2. The principal office address: 2435 ALI BABA AVENUE  
OPA LOCKA, FL 33054
- 3. The mailing address (if different): 4701 EAST AVENUE  
WEST PALM BEACH, FL 33407
- 4. Date of incorporation/qualification: 4/4/1979 Document number: 616437
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (if resigned, enter resigned)

JONES FOSTER SERVICE, LLC  
505 SOUTH FLAGLER DRIVE, SUITE 1100  
Street Address  
WEST PALM BEACH FL 33401  
City State Zip Code

- 6. The name and street address of the now registered agent (if changed) and /or registered office (if changed):

Capitol Corporate Services, Inc.  
515 East Park Avenue 2nd Fl  
Street Address P.O. Box NOT acceptable  
Tallahassee FL 32301  
City State Zip Code

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

*MSJ Welch* *Michael Welch Secretary*  
Signature of an officer or director Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

*Lelanee Case* *1-13-2020*  
Signature of Registered Agent Date

If signing on behalf of an entity:

Delanee Case, Asst. Secretary on behalf of Capitol Corporate Services, Inc.  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2ED45 (03/12)

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TALLAHASSEE, FL

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