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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

Email	Address:		

## LLC REGISTERED AGENT CHANGE KENNEDY RICHTER CONSTRUCTION FLORIDA LLC

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K. SALY

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ime of the limited liability company:  Kennedy Richter	Construction i	FIORIDA LLC
2. (a)		(b)	
, ,	Principal office address of limited trability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	7901 4th St N STE 300	79	901 4th St N STE 300
	St. Petersburg FL 33702		. Petersburg FL 33702
	06/23/25	L25	5000289777
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	CARDENAS, ERIC		
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida De	pt. of State:
	3504 29TH ST E		
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS)	<del></del>
	BRADENTON	34208	
	BRADENTON	<u>-</u>	
(b)	Registered Agents Inc		12- T
\ <i>\</i>	Enter name of NEW Registered Agent and/or NEW Registered	Office addres	
	7901 4th St N		TILL PH 3: 10
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg , FL	33702	
the cha agent v was/we the arti	imited liability company is not organized under the lavinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members called of organization or the operating agreement of the	f the register ability comp of the limited	ed office and the business office of the registered anny, it is hereby confirmed that the change(s) I liability company or as otherwise provided in ility company.
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
I herei provisi the obl to mere notified	by accept the appointment as registered agent and agrous ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I in writing of this change.	ree to act in performanc d for in Cha hereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accep pter 605, F.S. Or. if this document is being filed rm that the limited liability company has been
uld Ye			