

L02000002007

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(City/State/Zip/Phone #)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KCM, LLC  
(Name of corporation)

**DOCUMENT NUMBER:** L02000002007

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kenneth Keyes  
(Name of contact person)

KCM LLC  
(Firm/Company)

5900 Hiatus Road  
(Address)

Tamarac, FL 33321  
(City/state and zip code)

For further information concerning this matter, please call:

Kenneth Keyes at ( 954 ) 724-7000  
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

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04 OCT 21 AM 7:50  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

October 25, 2004

KENNETH KEYES  
KCM LLC  
5900 HIATUS ROAD  
TAMARAC, FL 33321

SUBJECT: KCM LLC  
Ref. Number: L02000002007

We have received your document for KCM LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is an LLC. Enclosed is the proper form for your LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 304A00061263

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TALLAHASSEE, FLORIDA

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

*Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: KCM LLC

2. The mailing address of the limited liability company is : 5900 Hiatus Road

Tamarac, FL 33321

01/28/2002

102000002007

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Kenneth Keyes

Name

8201 W. McNab Road

Address

Tamarac, FL 33321

City, State and Zip

6. The name and address of the new registered agent and/or office:

Kenneth Keyes

Name

5900 Hiatus Road

Florida street address (P.O. Box **NOT** acceptable)

Tamarac, FL 33321

FL

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Carey A. Keyes  
(Signature of a member or authorized representative of a member)

Carey A. Keyes  
(Printed or typed name of signee)

*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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

[Signature]  
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILED  
04 OCT 21 AM  
TALLAHASSEE, FL 32314