## 103000040244

Sprvice First THE JUL
1919 NOKH State Rd. 7 (Address)
Ste, 204
Ste. 204  (City/State/Zip/Phone #)  MUKGATE, FL 33CU 3  PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
9/22 PA change
L03-40244
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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 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: SERVICE FIRST TITLE, LLC					
	ss of the limited liability			ROAD 7 ST. 204	_·
<u> </u>					<u>-</u> ·
OCT. 21, 2003	···· <u>-</u>	L03000040244			
3. Date of filing/registration in Florida		4. Document number			_
5. The name of the reg Florida Department	ristered agent and the reg of State: ASBURY & ASSO			records of the	
	6542 HYPOLUXO	Name O RD. ST. 310		<del>5</del> 0	
	LAKE WORTH, F			04 SEP 22 SLEW Pour ALLAHASS	
	City, State and Zip			₹ <b>₹</b>	
6. The name and addre	ess of the new registered	agent and/or offi	.ce:	Z.::	•
	K & M HOLDINGS, LLC				
	1919 NORTH STATE ROAD 7 SR. 204			PH 1: 10	-
Florida street address (P.O. Box NOT acceptable)					
	MARGATE	<sub>FL</sub> 33063			
	City,	State and Zip			
confirmed that after the and the business office	company is not organized e change or changes are to of the registered agent we hereby confirmed that the	made, the Florida vill be identical.	a street address of the r Or, in the case of a Flo	registered office orida limited	f

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.

(Signature of a member or authorized representative of a member)

William TillMAK (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.

FOR KAMHOLDINGS, UC (Signature of Registered Agent)

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

**FILING FEE: \$25.00**