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AND ANASSEE FI ORD

D. SCOTT OCT 2 4 2016



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Tecora Bell tecora.bell@cscglobal.com

Date: October 18, 2016

Order#: 325851/013

Re: KWA ENGINEERS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Tecora Bell c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

EILED 6 OCT 20 PH 2: 19 SECRETARY OF STATE

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.

$T^{*}I^{*}$	orial	4 .				
1.	Na	me of the limited liability company: KWA EN	NGINEER	S, LLC		
2.	(a)	1411 North Westshore Blvd		(b)	2017 Fiesta Drive	
	(-)	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any:	. (-)-	_	ss of limited liability company: Y BE POST OFFICE BOX)
		#201		. <u>-</u>		
		Tampa, FL 33607	•	-	Sarasota, FL 34231	
		10/20/2005			L05000103577	
3.		Date of filing/registration in Florida		4.	Document	number
5.	(a)	Karins, David G				
<i>.</i> (a)	()	Registered Agent and Registered Office shown on the re-	cords of the	Florida D	ept. of State:	
		2017 Fiesta Drive				
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
						FALS: 5
(b						AND SI
		Sarasota	, FL	34231		TARY
	<i>(</i> 1.)	Commenter Coming Comment				FILEO OT 20 PI TARY OF HASSEE, F
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Re	egistered O	ffice addr	-cc.	
		man of the state o		THE HOUSE		STATE LORIDA
		1201 Hays Street				20 DA
		NEW Registered Office Address:				
					 	
		Tallahassee	, FL	32301		
the ag	e cha ent v is/we	mited liability company is not organized under nge or changes are made, the Florida street add vill be identical. Or, in the case of a Florida line are authorized by an affirmative vote of the mer cles of organization or the operating agreement	dress of th nited liab mbers of t	e registe ility com the limite	red office and the bu pany, it is hereby cored I liability company	isiness office of the registered nfirmed that the change(s)
		/s/ David Karins		David	Karins, Authorized P	erson erson
_	Signat	ure of a member or authorized representative of a membe	er			ped name of signee
pr the to	ovisi e obl mere	by accept the appointment as registered agent of ons of all statutes relative to the proper and coing at its statutes relative to the proper and coing at its statutes relative to the proper and coing at its registered agent as perfect a change in the registered office add the writing of this change.	and agree omplete pe provided j lress, I he	to act in erforman for in Ch reby con	n this capacity. I furt ce of my duties, and apter 605, F.S. Or, i firm that the limited	ther agree to comply with the I am familiar with and accept if this document is being filed liability company has been

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent Corporation Service Company BY: Grace E. Kirby, Asst. Vice President