

LO6000026498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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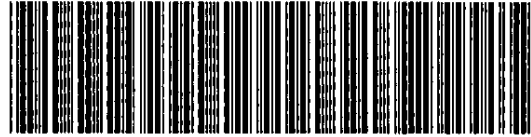
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

S. HAWKES

SEP 21 2010

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** K.R.BROBST BUILDER LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KENNETH BROBST  
Name of Person

K.R.BROBST BUILDER LLC  
Firm/Company

PO BOX 8088  
Address

NORTH PORT FL 34290  
City/State and Zip Code

KEN@KRBROBSTBUILDER.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KENNETH BROBST at ( 941 ) 993-9327  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

**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. Name of the limited liability company: K.R.BROBST BUILDER LLC

2. (a) Principal office address of limited liability company: 8236 CHESEBRO AVE

**(Note: MUST BE STREET ADDRESS)**

NORTH PORT FL 34287

(b) Mailing address of limited liability company: PO BOX 8088

**(Note: MAY BE POST OFFICE BOX)**

NORTH PORT FL 34290

MARCH 29, 2006

3. Date of filing/registration in Florida

4. Document number L06000026498

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: BUSINESS SUPPORT INC

Registered Office Address: 417 STOWE AVE SUITE A  
ORANGE PARK FL 32073

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:** KENNETH BROBST

**NEW Registered Office Address:** 8236 CHESEBRO AVE  
**(MUST BE FLORIDA STREET ADDRESS)**

NORTH PORT FL 34287

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.



Signature of a member or authorized representative of a member

KENNETH BROBST

Printed or typed name of signer

*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 of Registered Agent

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

FILING FEE: \$25.00