

LOT 0000 37937

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COVER LETTER

FO: Registration Section Division of Corporations				
Kelvin Florida LLC				
	Name of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this ma	atter to the following:			
Terry Moss				
Name of Person				
Kelvin Florida LLC				
Firm/Company				
1022 Wildwood Ln				
Address	·			
Naples, Fl 34105				
City/State and Zip Code				
terry@commercialrealtygroup.com				
E-mail address: (to be used for future annual :	report notification)			
For further information concerning this matter, plea	ase call:			
Terry Moss	206 949 6363 t ()			
Name of Person	Area Code & Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclosed is a check for the following amo	ount:			
\$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 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	me of the limited liability company: Kelvin Florida LL	.C	
2	(a)	1022 Wildwood Lane Naples FL 34105	(b)	022 Wildwood Lane Naples Fl 34105
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
 3. 5. 	(a)	Date of filing/registration in Florida INC Now	4.	Document number
		Registered Agent and Registered Office shown on the records of PO box 511 Wilmington DE 19899	the Florida De	pt. of State:
		Registered Office Address (MUST BE FLORIDA STREET)	1DDRESS)	
	(b)	FL Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		NOV 25
		Terry Moss		PH 2:
		NEW Registered Office Address: 1022 Wilwood lane		FL FALS
		Naples, FL	34105	
chage wathe	ange ent v s/we arti	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cless of organization of the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agreems of all statutes relative to the proper and complete.	registered of ability composite limited liabs	office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in illity company. Tarry Moss Printed or typed name of signee
no	tified	ons of all statules relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It is writing of this change.	i for in Cha hereby confi	pier 605, F.S. Or. if this document is being filed irm that the limited liability company has been