LB00024051

(Red	questor's Name)			
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(City	/State/Zip/Phone #)			
PICK-UP				
☐ PICK-UP	WAIT MAIL			
(Bus	iness Entity Name)			
(Doc	umen Number)			
Certified Copies	Certificates of Status			
Special Instructions to F	ling Officer:			
	Office Use Only			
C NAI FOR				
G. M¢LEOD				
OCT, 2/8 2008				
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EXAMINER				



300137112853

10/27/08--01015--008 **25.00

OR OCT 27 AMII: 11

COVER LETTER

	\$55 Filing Fee & Certified Copy
Enclosed is a check for the following a	amount:
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
(Name of Person)	(Area Code & Daytime Telephone Number)
Telap Tan al	t (<u>404</u>) 384-2218
For further information concerning this matter,	please call:
(City/State and Zip Code)	
St Petersburg, FL 33716	
135 Commonwealth Ct N (Address)	
405 0 111 0 . 11	
Kinettech, LLC (Firm/Company)	
(Name of Person)	
Telap Tan	
Please return all correspondence concerning this	s matter to the following:
The enclosed Registered Agent/Registered Office	-
	as Change and fee(s) are submitted for filing
Dear Sir or Madam:	
(Name of L	Limited Liability Company)
SUBJECT: Kinettech, LLC Change of	
Division of Corporations	
TO: Registration Section	

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: Kinettech, L	LC		. 🗈
2. (a) Pr	incipal office address of limited liability company Note: MUST BE STREET ADDRESS	: 135 Commonwealth Ct N St Petersburg, FL 33716		. 0
	ailing address of limited liability company: Note: MAY BE POST OFFICE BOX)	135 Commonwealth Ct N St Petersburg, FL 33716		. E
March 06		L08000024051		
3. Date of	of filing/registration in Florida	4. Document number		
5. (a) R	egistered Agent and Registered Office shown on t	he records of the Florida Dept. of Sta	ate:	D.
R	egistered Agent:	Telap Tan	80	VISIO
Registered Office Address:	egistered Office Address:	4511 Carrollwood Village Dr Tampa, FL 33618)CT 27	
(b) Eı	nter name of NEW Registered Agent and/or NEV	V Registered Office address:	Z	
, <u>N</u>	EW Registered Agent:	Telap Tan		- ¥
	EW Registered Office Address: MUST BE FLORIDA STREET ADDRESS)	135 Commonwealth Ct N		•
-		St Petersburg,FL_33	3716	•
that after office of hereby co liability of limited h	ited liability company is not organized under the I the change or changes are made, the Florida streethe registered agent will be identical. Or, in the capation of the change (s) was/were authorized becompany or as otherwise provided in the articles of ability company. If a member or authorized representative of a member)	t address of the registered office and ase of a Florida limited liability comp y an affirmative vote of the members	the busin pany, it is s of the li	iess ; mited
Telap Tan (Printed or t	typed name of signee)	-		
I hereby comply w am famili F.S. [Or,] confirm [accept the appointment as registered agent and a pith the provisions of all statutes relative to the project with and accept the obligations of my position if this document is being filed to merely reflect a chat the limited liability company has been notified		agree to v duties, c n Chapte ss, I herel	and I r 608, by
(Signature o	of Registered Agent)	• •		

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