

L080000047280

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EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KEMP BROTHERS CONSTRUCTION, 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:

SHANE KEMP
Name of Person

KEMP BROTHERS CONSTRUCTION
Firm/Company

8054 WASHINGTON ST.
Address

PORT RICHEY, FL 34668
City/State and Zip Code

shane@kbcfl.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHANE KEMP at (727) 255-1559
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: KEMP BROTHERS CONSTRUCTION, LLC

2. (a) Principal office address of limited liability company: _____



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

8054 WASHINGTON ST
PORT RICHEY, FL 34668

(b) Mailing address of limited liability company: _____



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

8054 WASHINGTON ST
PORT RICHEY, FL 34668

05/12/2008

3. Date of filing/registration in Florida

4. Document number

L08000047280

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

Registered Agent:

Registered Office Address:

KEMP, SHANE T
3152 LITTLE ROAD #302
TRINITY, FL 34655 US

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

NEW Registered Agent:

SHANE T. KEMP

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

8054 WASHINGTON ST
PORT RICHEY, FL 34668

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

SHANE T. KEMP

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.

Signature of Registered Agent

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