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D. BRUCE

OCT 2 2 2009

EXAMINER

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. Kematef LLC 1. Name of the limited liability company: 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 1800 N Military Trail, Suite 160 Boca Raton, FL 33431 (b) Mailing address of limited liability company: 1800 N. Military Trail, Suite 160 (Note: MAY BE POST OFFICE BOX) Boca Raton, FL 33431 09/25/2008 L08000091264 3. Date of filing/registration in Florida 4. Document number (a) Registered Agent and Registered Office shown on the records of the Florida Deman Registered Agent: HRAWG Corp. Registered Office Address: 1801 N. Military Trail Suite 200 Boca Raton, FL 3343 CЛ (b) Enter name of NEW Registered Agent and/or NEW Registered Office address HANKINS NORTHWOOD ROMAN WENZEL P.L. NEW Registered Agent: <u>1800 N, Military Trail</u> NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) Suite 160 **Boca Raton** FL33431 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 By: Kematef Group Corp., Managing Member Printed or typed name of signee By: Konstantin Chernyaev 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 auties, 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.

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

FILING FEE: \$25.00

Signature of Registered Agent