## 168000113725

(Re	questor's Name)		
(Address)			
(Address)			
(City/State/Zip/Phone #)			
	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
:			

G. MCLEOD

OCT 19 2010

EXAMINER



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10 OCT 18 PM 1:29
SECRETARY OF STATE
ALLAHASSEE FINAIE

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJECT: KBC PROPERTIES LLC		
	Name of Lin	nited Liability Company
Dear S	Sir or Madam:	
The en	nclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.
Please	return all correspondence concerning th	is matter to the following:
	Christine Shewbridge	
	Name of Person	
	KBC Properties LLC	
	Firm/Company	
13260 Sabal Chase		
	Address	
	Palm Beach Gardens, FL 3341	8
	City/State and Zip Code	<u>~</u>
	cshewhridge@audicoralsprings.c	om
E-	cshewbridge@audicoralsprings.c mail address: (to be used for future annual report not	fication)
For fu	rther information concerning this matter	, please call:
		at ( <u>954</u> ) <u>509-8960</u>
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAILING ADDRESS:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	Clifton Building	P.O. Box 6327
	2661 Executive Center Circle	Tallahassee, Florida 32314
	Tallahassee, Florida 32301	
	Enclosed is a check for the following	amount:
į	\$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.

Name of the limited liability company:	KBC Properties LLC
2. (a) Principal office address of limited liability of	company: 13260 Sabal Chase
(Note: MUST BE STREET ADDRESS)	
	Palm Beach Gardens, FL 33418
(b) Mailing address of limited liability company	y: (Same) 13260 Sabal Chase
(Note: MAY BE POST OFFICE BOX)	Palm Beach Gardens, FL 33418
12/12/2008	L08000113725
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	own on the records of the Florida Dept. of State:
Registered Agent:	Novela Law
Registered Office Address:	1390 Brickell Avenue Suite 2007 Miami, FL 33131
(b) Enter name of <u>NEW Registered Agent</u> and	l/or NEW Registered Office address □
NEW Registered Agent:	Christine Shewbridge
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRES	
	Palm Beach Gardens ,FL33418
liability company, it is hereby confirmed that the c	le, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization
Bruce Qvale, Managing Member	
Printed or typed name of signee	
I hereby accept the appointment as registered age comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being file address, I hereby confirm that the limited liability of the confirmation of	nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, of my position as registered agent as provided for in ed to merely reflect a change in the registered office company has been notified in writing of this change.
Signature of Registered Agent	<u> </u>

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