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WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
_ Certificates	of Status	
Special Instructions to Filing Officer:		
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
NOV 3 0 2012
EXAMINER

## **COVER LETTER**

Division of Corporations		
SUBJECT: K.B. Concept	Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
KEIVIN A. BVrgos Name of Person		
K.B. CONCEPTS Group, L	LC SECRITALLY	
10773 N.W. 58th Stream	NOV 29 PM 5: 59 SECRETARY OF STATE ALLAHASSEE. FLORID  OF #69  OF #69	
DUPAL, FL 33178 City/State and Zip Code	5: 59 EGRIDA	
E-mail address: (to be used for future annual report n	SOS · COm .	
For further information concerning this matter	er, please call:	
K-EIVIN A. BVrgos at (.305) 492 - 9077  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	ng 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.

agent, or both, in the state of 1 tortaa.		
1. Name of the limited liability company: K-B. Co	incepts Group, LLC	
2. (a) Principal office address of limited liability compan ( <i>Note: MUST BE STREET ADDRESS</i> )	y: 10773 N.W. 58 Street #69 Doral, FL 33178	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	10773 NiW: 58 Street #69 Doral, FL 33178	
1/28/2009  3. Date of filing/registration in Florida	<u>L0 90000 8831</u> 4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	Kelvin A. Burgos	
Registered Office Address:	9741 NW 6 LANES 3	
	Miami, FL 331737 2	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	Kelvin A. Burgas 55	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	10773 N.W. SS Street #49 Doral, , ,FL 33178	
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    Velviv A   Burgos   Printed or typed name of signee   Printed or typed name	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provision of all statutes relative to the provision of and I amfamiliar with and accept the obligations of my per Chapter 688. For if this document is being filed to me address. I hereby confirm that the limited liability company	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office sy has been notified in writing of this change.	
Signature of Registered Agent  Division of Corporations, P.O. Box 6:	327, Tallahassee, FL 32314	

**FILING FEE: \$25.00** 

INHS18 (05/08)