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(Re	equestor's Name)				
(Ac	ddress)				
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D. SCOTT NOV 1 0 2016

COVER LETTER

TO: Registration Section

ויייט	ision of Corporations			
SUBJECT:				
	Name	of Limited	Liability Company	
Dear Sir or l	Madam:			
The enclose	d Registered Agent/Registered Offic	e Change an	nd fee(s) are submitted for filing	
Please return	n all correspondence concerning this	matter to th	e following:	
Travis J. I	McConnell, Esquire			
	Name of Person			
Law Office	e of Travis J. McConnell, PLLC			
	Firm/Company			
3601 1st	Avenue North			
	Address			
Saint Pete	ersburg, FL 33713			16 NO SECRITALLA
	City/State and Zip Code			NOV -9 AN IO 38 CRETARY OF STATE LANASSEE, FLORIDA
travismola	aw@gmail.com			NOV -9 AN IO 3 CRETARY OF STATI LANASSEE, FLORIG
E-mai	l address: (to be used for future annu	al report not	tification)	STA STA
For further	information concerning this matter, p	olease call:		38 38
Travis Mo	Connell	727	348-6573	
	Name of Person	_ at (Area Code & Daytime Tele	phone Number
Reg Div Çli1 266	REET/COURIER ADDRESS: gistration Section vision of Corporations fton Building 11 Executive Center Circle lahassee, Florida 32301	} ! !	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314	
End	closed is a check for the following :	amount:		
	S25 Filing Fee	X	\$55 Filing Fee & Certified Cop	у
INHS18 (2/1	4)			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. Na	me of the limited liability company: Kennedy Cor	nstructio	on Groups,	, LLC		
2. (a)		(t	o)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		-	of limited liability compact of the limited liability compact of the li	•
	1108 24th Avenue East, Unit 114		1108 24t		East , Unit 201	
	Ellenton, Florida 34222	_	Ellenton,	Florida 342	222	
	02/08/2013		L130000	25284		
3.	Date of filing/registration in Florida	- 4.		Document nu	mber	
5. (a)	Law Offices of Travis J. McConnell, PLLC					
5. (a)	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of State	:		
	Registered Office Address (MUST BE FLORIDA STREET) 4250 Central Avenue	ADDRES.	<u>s)</u>			
	Saint Petersburg, FL	33711				
(b)	Enter name of NEW Registered Agent and/or NEW Registered	l Office ac	ldress:		16 I SECR	
	NEW Registered Office Address:				AHAM T	<u> </u>
	3601 1st Avenue North			_	1-9 ARY O	- П
	Saint Petersburg , FI	33713	}	-	AN IO 30 F STATE FLORID	J
the cha agent was/w	imited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the reg iability c of the lir	istered office ompany, it is nited liability	e and the busir s hereby confi y company or	ness office of the re irmed that the chan	egistered ge(s)
	The last		ME	LVIN A	KENNEDY d name of signee	
Signa	ture of a member or authorized representative of a member			Printed or types	d name of signee	
provis the ob- to mer	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to ac e perforn ed for in hereby c	et in this cape nance of my e Chapter 605 confirm that	acity. I furthe duties, and I a i, F.S. Or, if t the limited lia	er agree to comply im familiar with an his document is be ability company has	with the id accepting filed s been
Signati	are of Registered Agent					