

L16 0000 11115

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☒ PICK-UP ☐ WAIT ☐ MAIL

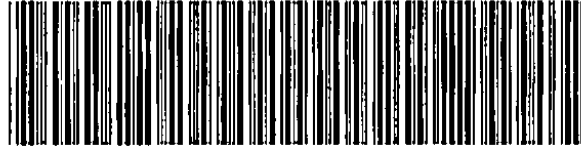
(Business Entity Name)

(Document Number)

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R. WHITE  
JAN 27 2020

*MARKOVITZ & GERMINARO*  
*Attorneys-At-Law*

*Robert S. Markovitz*  
*and* *Michael J. Germinaro*

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*1001 East Entry Drive*  
*Suite 201-A*  
*Pittsburgh, Pennsylvania 15216*  
*412/571-0601*  
*Fax: 412/571-1635*

*Robert S. Markovitz*  
*(917-1999)*

December 18, 2019

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

Re; KBS Design & Consulting, LLC


Dear Sir or Madam:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or both for a Limited Liability Company, being filed on behalf of the entity listed above. Specifically enclosed are the following:

1. Original Statement of Change of Registered Office or Registered Agent or both for a Limited Liability Company.
2. Check in the amount of \$25 made payable to the Florida Department of State.

If there are any questions regarding this filing, or if anything further is needed, please contact me at 412-571-0500. Thank you for your kind assistance in this matter.

Very truly yours,



Eric R. Jahn

ERJ

Enclosure

**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.*

Name of the limited liability company: KBS DESIGN & CONSULTING, LLC

a) \_\_\_\_\_

Principal office address of limited liability company:

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

1930 GULF SHORE BLVD N, APT C203

NAPLES, FL 34102

(b) \_\_\_\_\_

Mailing address of limited liability company:

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

1930 GULF SHORE BLVD N, APT C203

NAPLES, FL 34102

01/08/2016

Date of filing/registration in Florida

4.

L16000011115

Document number

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

ROOS, MATT

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

340 LIDO DRIVE

FORT LAUDERDALE, FL 33301

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

SMITH, ROBERT P.

**NEW** Registered Office Address:

1930 GULF SHORE BLVD N, APT C203

NAPLES, FL 34102

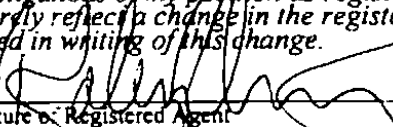
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the  
change or changes are made, the Florida street address of the registered office and the business office of the registered  
agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)  
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

ROBERT P. SMITH

Printed or typed name of signer

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 605, F.S. Or, if this document is being filed  
to reflect a change in the registered office address, I hereby confirm that the limited liability company has been  
informed in writing of this change.

  
\_\_\_\_\_  
Signature of Registered Agent

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