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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.	Name of the limited liability company: REPARTOKOHLY, LLC					
2 (a)	9360 SW 140th Street		9360 SW 140th Street		
. \	, - ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0	/	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Miami FL 33176		Miami, Fl	. 33176	
		January 17, 2017		L1700001	2654	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	United States Corporation Agents, Inc.				
٥.	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
		12202 Winding Ook Court				
		13302 Winding Oak Court Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u> </u>		
		Registred Office Address March 1817 BE 1 Donaton STREET	ADDICESS,	2		
		Α				
		Tampa ,F	L <u>33612</u>		; "w.	
					~ ∞	
((b)	Corporation Service Company				
		Enter name of NEW Registered Agent and/or NEW Registered Office address:			<i>€</i> 5	
					——————————————————————————————————————	
		1201 Hays Street			77	
		NEW Registered Office Address:			2. 23 2. 23	
		Tallahassee , F	L 32301			
IC 1	1:			Casas of File	aide isiahaanta aansaa dahasa Aa	
the age was	cha nt w /we	mited liability company is not organized under the la nge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited 1 are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the regis iability co of the lim e limited l	tered office mpany, it is ited liability iability com	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
/s/ Frederick Kohly Signature of a member or authorized representative of a member					Printed or typed name of signce	
I he protect the ton the noting	ereli visio obli nere fies	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, It in writing of this change.	e performe ed for in C hereby co	in this capa ince of my d chapter 605, onfirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	
Sign	áatui	re of Registered Agent Cornoration Service Company	BY: Li	ndsev M. E	Baronie, Asst. Vice President	