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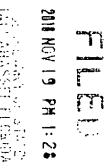
(Requestor's Name)	_
(Address)	_
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PICK-UP WAIT MAIL	
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: T+K Construction and remodeling Name of Limited Liability Company	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Peter Ressa Jn Name of Person	
T+ K construction and Remodely Firm/Company	
4309 Kismt Parkung West Address	
Cape Coral FL 33993 City/State and Zip Code	
City/State and Zip Code	
Peter. Ressa @ TK remodel net E-mail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call:	2
Peter Ressa JR a1 (239) 671-4571	- -
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 amount:	

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

INHS18 (2/14)

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.

7 1177 1111	
1. Na	me of the limited liability company: T+K construction and remodeling
2. (a)	4309 Kismet Parkway West (b) 4309 Kismet Parking west
, , ,	Principal office address of limited Ability company: Mailing address of limited liability company:
	The state of the s
	CAPE WORAL PL 33993 CAPE CORAL FL 33993
	10/12/2018 61800241802
3.	Date of filing/registration in Florida L18 D00 241802 Document number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	4309 Kismet Parkung West
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	-
	Cape Coral .Fl. 33993
(b)	Peter Ressa Jr. Call Carrier
	Peter Ressa Jr. — Cequire Jr. Bank request Tr. Bank request Tr.
	. Λ ⇔ — CDex
	1309 Komet Parkway W(st.
	NEW Registered Office Address: Cape Coral FL 33993
	. FL
10.4 1	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
thu cha	was or changes are made, the Florida street address of the registered office and the business office of the registered
was/wi	vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the arti	cles of organization or the operating agreement of the limited hability company.
Ciana	ture of a member reamborised representative of a member Printed or typed name of signee
	to the state of the second to
provisi the obl	by accept the appointment as registered agent and agree to act in this capacity. I father agree to comply, which has of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address. I hereby contirm that the limited liability company has been
to mere notified	ely reflect a change in the registered office address. I hereby confirm that the limited trabitity company has been I in writing of this elamon.
•	(MO)

Signature of Registered Agent