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(Address)

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SECRETARY OF STATE  
TALLAHASSEE, FL

L1119121

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Knox Concrete Consultant LLC  
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:

Shea Fortune  
Name of Person

Knox Concrete Consultant LLC  
Firm/Company

1515 Saddle Run Drive  
Address

Osteen, Florida 32764  
City/State and Zip Code

Sheafortune@knox-concrete.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shea Fortune 386 215-9834  
Name of Person at ( ) Area Code & Daytime Telephone Number

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following 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 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: Knox Concrete Consultant LLC

2. (a) Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)

1515 Saddle Run Drive  
Osteen, FL 32764

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)

915 Doyle Road Suite 303-118  
Deltona, FL 32725

08/26/2019 08/26/2019  
3. Date of filing/registration in Florida 4. Document number

5. (a) Frazer, Robert D  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
2090 S Nova Road Suite AA05  
South Daytona, FL 32119

(b) Fortune, Shea  
Enter name of NEW Registered Agent and/or NEW Registered Office address

NEW Registered Office Address:  
1515 Saddle Run Drive  
Osteen, FL 32764

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.

Shea Fortune  
Signature of a member or authorized representative of a member

Shea Fortune  
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 merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.)

Shea Fortune  
Signature of Registered Agent

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

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2021 FEB 19 PM 2:5

SECRETARY OF STATE  
TALLAHASSEE, FL