

L20000001572

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

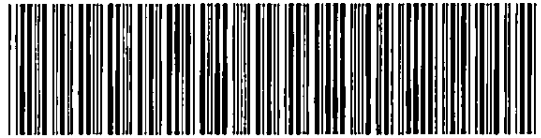
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200405347432

03/29/23--01002--036 **125.00

FILED

2023 MAR 29 AM 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DC

5/4/23

RACH/

Reinst. for

RA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: K&B SO FRESH SO CLEAN JANITORIAL SERVICES

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:

KENNY HARRIS

Name of Person

K&B SO FRESH SO CLEAN JANITORIAL SERVICES

Firm/Company

PO Box 880102

Address

Port St Lucie FL 34988

City/State and Zip Code

kb.janitorial@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KENNY HARRIS

7724752249

at (_____) _____

Name of Person

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: K&B SO FRESH SO CLEAN JANITORIAL SERVICE LLC

2. (a) _____ (b) PO BOX 880102 PORT ST LUCIE FL 34988

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

526 SE EUCLID LN PORT ST LUCIE FL 34983

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

12-19-19

L20000001572

3. Date of filing/registration in Florida

4. Document number

5. (a) UNIVERSAL REGISTERED AGENTS, INC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1317 CALIFORNIA STREET TALLAHASSEE

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

FL 32304

(b) KENNY HARRIS

Enter name of NEW Registered Agent and/or NEW Registered Office address:

526 SE EUCLID LN PORT ST LUCIE

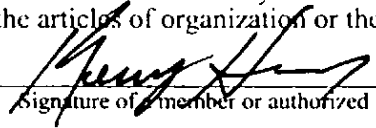
NEW Registered Office Address:

FL 34983

FILED
2028 MAR 29 AM 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

KENNY HARRIS


Signature of member or authorized representative of a member

Printed or typed name of signee

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.


Signature of Registered Agent