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COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJE	KAM FL 6	LLC		
	<u></u>		ne of Limited	Liability Company
Dear S	ir or Madam:			
The en	closed Registered	Agent/Registered Off	ice Change a	nd fee(s) are submitted for filing.
Please	return all corresp	ondence concerning th	is matter to t	ne following:
TRACE	EY C HIGGINBO	⁻ НАМ		
	·	Name of Person		
HIGGI	NВОТНАМ СОМІ	PANIES INC		
		Firm/Company		
3790 N	US 1			
		Address		
сосо	A, FL 32926			
•	City	/State and Zip Code		
TCHIG	GINBOTHAM@H	IIGCOINC.COM		
E	-mail address: (to	be used for future and	nual report no	tification)
For fur	ther information (concerning this matter.	please call:	
TRACE	EY C HIGGINBOT	⁻ НАМ	321 at (632-5726
	Name o	Person	ur (Area Code & Daytime Telephone Number
	Mailing Addre Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a ch	eck for the following	amount:	
	■ \$25 Filing Fe	e	☐ \$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. 1	Name of the limited liability company: KAM FL 6	LLC	_	
2. (a	2800 N MILITARY TRAIL STE 116	(b) ²⁸⁰⁰ N М	IILITARY TRAIL STE 116
2. (a	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	WEST PALM BEACH, FL 33409		WEST PA	LM BEACH, FL. 33409
				<u>.</u>
	03/02/2020		L20000069-	471
3.	Date of filing/registration in Florida	4.		Document number
5. (:	BHUPENDRABHAI BH PATEL			
J. (Registered Agent and Registered Office shown on the reco	rds of the Florid	a Dept. of Stat	ec:
	1550 N FEDERAL HWY STE 15			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			. 20
				- 120 S
	BOYNTON BEACH	_, FL33435		F" 1. 2020 SEP 28
(b	BHUPENDRABHAI BH PATEL			ς, · · · · · · · · · · · · · · · · · · ·
	Enter name of NEW Registered Agent and/or NEW Regis	stered Office ac	ldress:	AHIO: 50 OF STATE SEE, FL
	2800 N MILITARY TRAIL STE 116			VIE 50
	NEW Registered Office Address:		<u> </u>	_
				_
	WEST PALM BEACH	_, FL		_
changagent was/sthe a	limited liability company is not organized under the correlation of the correlation of the florida street address of will be identical. Or, in the case of a Florida limit were authorized by an affirmative vote of the membricles of organization or the operating agreement of the interest and the corresponding to the operation of the interest and the corresponding to the operation of the operation of a member of authorized representative of a member	ne laws of the of the register sed liability copers of the limited	ed office an ompany, it is nited liability con BHUPEN,	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in npany. (VRABHA) BH PATETER Printed or typed name of signee
provi the o to me	cby accept the appointment as registered agent and sions of all statutes relative to the proper and completions of my position as registered agent as properly reflect a change in the registered office addressed in writing of this change.	a agree to ac pleie perform wided for in (ss. I hereby c	ance of my Chapter 605 Onfirm that	duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been

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

Signature of