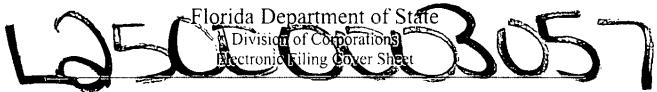
Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC. Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_

### LLC REGISTERED AGENT CHANGE KINETICAL SERVICES GROUP LLC

Certificate of Status	0
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#### $T_{\alpha}$

### From: Candace Pringle

#### **COVER LETTER**

TO:	Registration Section
	Division of Corporations

## SUBJECT: KINETICAL SERVICES GROUP 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: Erik Treutlein Name of Person Legalzoom.com, Inc. Firm/Company 9900 Spectrum Dr Address Austin, TX 78717 City/State and Zip Code alsup365@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Erik Treutlein 800 773-0888 ext 9724 Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:

\$55 Filing Fee & Certified Copy

□ \$25 Filing Fee

# 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.

(a)		(h	)		
(a) <sub>.</sub>	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	(b	<i>,</i>	tailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	3380 CHATSWORTH LN		3380 C	CHATSWORTH LN	
	ORLANDO, FL 32812		ORLA	NDO, FL 32812	
	01/02/2025		L25000	003057	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Registered Agent and Registered Office shown on the recor			_	
		rds of the Florida	Dept, of St	ate:	
	SUP, ALAN N		<u>.                                    </u>	<u></u>	
	Registered Office Address <u>MUST BE FLORIDA STR</u> 3380 CHATSWORTH LN	<u>EET ADDRESS</u>	2		
	ORLANDO	<sub>Et</sub> 32812		ET! 2025 JAII 16	
				J	
(b) .				Ell ED	
	Enter name of NEW Registered Agent and/or NEW Regis	stered Office add	<u>lress</u> :	F A**	
	UNITED STATES CORPORATION AGE	ENTS, INC.			
	NEW Registered Office Address:			- : : 27	
	476 Riverside Ave.			(·)	
	Jacksonville	. FL 32202			
he chai gent w vas/we	mited liability company is not organized under the florida street addressed or changes are made, the Florida street addressed be identical. Or, in the case of a Florida limit resuthorized by an affirmative vote of the membeles of organization or the operating agreement of	ess of the regis and liability co pers of the lim	tered offi mpany, it ited liabil	ce and the business office of the registere is hereby confirmed that the change(s) ity company or as otherwise provided in	
rik	E Treutlein	Erik	Treutle	in	
Signati	ure of a member or authorized representative of a member	<del></del> -		Printed or typed name of signee	
hereb rovisio he obli	y accept the appointment as registered agent and ons of all statutes relative to the proper and comp gations of my position as registered agent as pro ty reflect a change in the registered office addres	d agree to act plete perform wided for in C sv. I hereby co	in this ca ince of my hapter 60 onfirm tha	pacity. I further agree to comply with the y duties, and I am familiar with and acce 95, F.S. Or, if this document is being file to the limited liability company has been	

Signature of Registered Agent