

MO6000000973

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000155815 3)))



H080001558153ABCD

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

Ⓡ Resubmit Ⓡ

6/19/08

REGISTERED AGENT CHANGE**KFMSGP, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02 (3)
Estimated Charge	\$35.00

FILED
08 JUN 19 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

T. HAMPTON

JUN 24 2008

EXAMINER



June 23, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

KFMSSGP, LLC
12550 FUQUA
HOUSTON, TX 77034

SUBJECT: KFMSSGP, LLC
REF: M06000000973

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Please list the correct the name of the registered agents as it reflected with the office now on the file. Please amend your document accordingly.

If you have any further questions concerning your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H08000155815
Letter Number: 808A00037808

RECEIVED
2008 JUN 23 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, 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: KFMSGP, LLC
2. (a) Principal office address of limited liability company: 12550 Fuqua St.
(Note: **MUST BE STREET ADDRESS**) Houston, TX 77034
- (b) Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

- 02/17/2006 M06000000973
3. Date of filing/registration in Florida
 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Agent: Stauffer, Mark R.
Registered Office Address: 5600 W. Commerce St.
Tampa, FL 33616

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
NEW Registered Agent: CT Corporation System
NEW Registered Office Address: 1200 South Pine Island Road
(**MUST BE FLORIDA STREET ADDRESS**) Plantation, FL 33324

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.

Jenni Rose
(Signature of a member or authorized representative of a member)
Jenni Rose, Attorney-in-Fact for Cabell Acree, VP and General Counsel for Orion Marine Group, LLC and Affiliates
(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 608, 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.

By: Jane Zachritz
(Signature of Registered Agent) **Assistant Secretary**
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

INHS18 (05/08)
FD-15 - 05/27/2006 CT System Online

FILED
08 JUN 19 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA