

MI0000001892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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FILED  
12 MAY 15 PM 1:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
MAY 16 2012  
EXAMINER

**COOLEY  
SHRAIR**  
ATTORNEYS AT LAW

**Thomas A. Miranda**  
ATTORNEY

**DIRECT DIAL**  
413 785 8036

**E-MAIL**  
tmiranda@cooleyshrair.com  
www.cooleyshrair.com

May 9, 2012

FILE NO. 24597.7

Secretary of State  
State of Florida  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: KC Tactical, LLC Change of Registered Agent

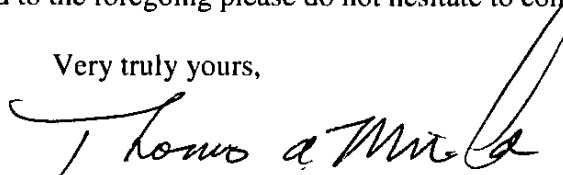
Dear Sir:

Enclosed for filing with regard to the Limited liability company please find the following:

1. Cover letter to Registration Section Division of Corporations;
2. Filing fee in the amount of \$25.00; and
3. Statement of Change of Register Office and Registered Agent.

If you have any questions with regard to the foregoing please do not hesitate to contact me.

Very truly yours,



THOMAS A. MIRANDA

TAM/hh  
Enclosure

cc: James Graham (via e-mail)

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KC TACTICAL, 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:

JAMES J. GRAHAM

Name of Person

Firm/Company

3818 Southwest 2nd Street

Address

Cape Coral, FL 33991

City/State and Zip Code

bonnienjay@comcast.net

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

For further information concerning this matter, please call:

THOMAS A. MIRANDA

Name of Person

at ( 413 )

781 0750

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**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 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: KC TACTICAL, LLC
2. (a) Principal office address of limited liability company: 20 LADD AVE. SUITE 3

**(Note: MUST BE STREET ADDRESS)**

FLORENCE, MA 01062

- (b) Mailing address of limited liability company:

20 LADD AVE. SUITE 3

**(Note: MAY BE POST OFFICE BOX)**

FLORENCE, MA 01062

APRIL 26, 2010

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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:

CORPORATION SERVICE COMPANY

Registered Office Address:

1201 HAYS STREET

TALLAHASSEE FL

32301 2525

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

JAMES J. GRAHAM

NEW Registered Office Address:

3818 SOUTHWEST 2ND STREET

**(MUST BE FLORIDA STREET ADDRESS)**

CAPE CORAL, FL 33991

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.

  
Signature of a member or authorized representative of a member

JAMES J. GRAHAM

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.*

  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00