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TO: Registration Section

INHS18 (2/14)

Divi	sion of Corporations				
SUBJECT:	ALBERT KEMPERLE OF FLORIDA, LLC				
oom nor	Name of Limited Liability Company				
Dear Sir or N	∕ladam:				
The enclosed	Registered Agent/Registered Office	Change and f	ee(s) are submitted for filing.		
Please return	all correspondence concerning this n	natter to the fo	ollowing:		
THOMAS	JONES, CPA				
	Name of Person		_		
JONES, L	ITTLE & CO. CPA'S, LLP				
	Firm/Company		_		
86 W MAII	N ST, STE 2				
	Address		_		
EAST ISLI	P, NY 11730				
	City/State and Zip Code				
	onesandlittle.com				
E-mail	address: (to be used for future annual	report notific	cation)		
For further in	nformation concerning this matter, ple	ase call;			
Thomas Jo	ones, CPA	631	277-8500		
	Name of Person		Area Code & Daytime Telephone Number		
Regi Divis Clift 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle shassee, Florida 32301	Regi Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, Florida 32314		
Encl	osed is a check for the following an	sount:			
2 0 \$2	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. N	ame of the limited liability company: Albert Kempe	erle of Florida	, LLC
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2698 Dardanelle Drive	8400	New Horizons Blvd
	Orlando, FL 32808	Ami	yville, NY 11701
	03/04/1999	M990	00000349
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			및 그
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. o	FState: \$ 8 TI
	Ronald Kemperle		# 7 F
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
	56 Marlin Drive		rState:
	Key Largo FI	33037	f State:
(b)	Enter name of NEW Registered Agent and/or NEW Registered Ronald Kemperle	1 Office address:	
	NEW Registered Office Address:		
	56 Marlin Lane		
	Key Largo, FL	33037	
the cha agent was/w the art Signa I here provisi	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete	f the registered of ability company of the limited liability Elimited Bonald K Ronald K ree to act in this performance of	office and the business office of the registered it is hereby confirmed that the change(s) ability company or as otherwise provided in company. The company of a state of signer capacity. I further agree to comply with the finy duties, and I am familiar with and accept
the obli to mer notifie	ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this change.	et for in Chaptei hereby confirm	r 605, F.S. Or, if this document is being filed that the limited liability company has been

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