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(Re	questor's Name)			
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COVER LETTER

TO: Amendment Section Division of Corporations					
LOWER KEYS CONSTRUCTION WORKERS ASSOCIATION, INC. SUBJECT:					
Name of Corporation					
DOCUMENT NUMBER: N15000006371					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
KEVIN BARLOW					
Name of Contact Person					
Firm/Company					
30837 DELGADO LANE					
Address					
BIG PINE KEY, FL 33043					
City/State and Zip Code					
KBKEYS.LIMEY@GMAIL.COM					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
KEVIN BARLOW Name of Contact Person Name of Contact Person at (850) 686-5515 Area Code & Daytime Telephone Number					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a \$35.00 check made payable to the Department of State.					
Mailing Address: Amendment Section Street Address: Amendment Section					
Division of Corporations Division of Corporations					
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314 2661 Executive Center Circle					

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	•	17,0502, 607,1508, or 617,1508, Flori a organized under the laws of the State		
		registered agent, or both, in the State		
1. The name of	the corporation: LOWER KEYS	CONSTRUCTION WORKERS	ASSOCIATION, INC.	
2. The principal	office address: 1668 BOGIE E KEY, FL 33043			
	address (if different): 30837 DE	ELGADO LANE		
	NE KEY, FL 33043			
4. Date of incorp	poration/qualification: 06/25/20	Document number: N15	000006371	
	d street address of the current regis	stered agent and registered office on file resigned)		
	KEVIN BARLOW		SI	
	KEVIN BARLOW 26958 MARIPOSA ROAD SUMMERLAND KEY, FL 33043			
	SUMMERLAND KEY, F	L 33043	30	
6. The name and (if changed):	d street address of the new register	ed agent (if changed) and /or registered	I office	
	KEVIN BARLOW			
	30837 DELGADO LANE	<u> </u>		
	BIG PINE KEY, FL 3304	30x NOT acceptable		
The street addreas changed will	ess of its registered office and the	street address of the business office o	f its registered agent.	
		dopted by its board of directors or by een notified in writing of the change.		
K	Barlin	KEVIN BARLOW		
•	ire of an officer or director	Printed or typed name an	d title	
I further agree (performance of avent. Or, if th	to comply with the provisions of a "my duties, and I am familiar with	ent and agree to act in this capacity, all statutes relative to the proper and a and accept the obligation of my posit to reflect a change in the registered of tified in writing of this change.	complete tion as registered ffice address, I	
		08/24/2017		
· ·	nuture of Registered Agent	Date		
If signing on be	chalf of an entity:			
KEVIN BAF				
ľ	yped or Printed Name			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *