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JOHN W. KEARNS, P.A. ATTORNEY 431 GERONA AVENUE CORAL GABLES, FLORIDA 33146 City/State/Zip	TALLAINNO	TILESTATE

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1.		
(Corporation Name)	(Document #)	······································
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Walk in Pick up time		Certified Copy
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NEW FILINGS A Goroff Profit A Goroff Not for Profit A Goroff Limited Liability A Goroff Domestication A Goroff Other Other	AMENDMENTS Amendment Resignation of R.A., Change of Registere Dissolution/Withdra Merger REGISTRATION/QUA	d Agent wal
 Annual Report Fictitious Name 	 Foreign Limited Partnership Reinstatement Trademark Other 	
		Examiner's Initials

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Date Filed _____

STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

1.	The name of the corporation is: Kearns Construction Company
2.	The name and address of its present registered agent is:
	CORPORATION INFORMATION SERVICES, INC. 502 East Park Avenue Tallahassee, Florida 32301
3.	The <u>name and street address</u> to which its registered agent is to be changed is: (P.O. BOX NOT ACCEPTABLE)
	431 Gerona Avenue
	Coral Gables, FL 33146
	The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors. Signature
	Date 2/14/01
AE AC TH AN OE ST Plo	AVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE BOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY CCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR- HER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER ND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE BLIGATION OF MY POSITION AS REGISTERED AGENT UNDER SECTION 607.0505, FLORIDA CATUTES.

7/90

Date

(Agent)