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(((H19000040114 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 : (888)705-7274 Phone

Fax Number : (888)706-7274

FEB 0 5 2019

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

I ALBRITTON

Email Address:

REGISTERED AGENT CHANGE KELLY INDUSTRIAL SERVICES INC.

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pg 2 of 4 H19000040114 3

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Kelly Industrial Services Inc.

Name of Corporation

DOCUMENT NUMBER

P08000035860

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:

Mary Castillo

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd, Ste 300

Address

Austin, TX 78744

City/State and Zip Code

notices@rasi.com

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

For further information concerning this matter, please call:

Mary Castillo

,888 、7

705-7274

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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0 ange is submitted for a corporation org	unized under the la	nvs of the State of	Florida
	er to change its registered office or regi			Florida,
l. The name of	the corporation: Kelly Industria	al Services I	inc.	
	l office address: 815 FOX RUN BEACH, FL 32962	NSW		
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: 4/8/2008	Document	number: P080	000035860
	d street address of the current registered artment of State: (If resigned, enter resigned, enter resigned).	gned)		
	1200 SOUTH PINE ISLAND R	ROAD		100
	PLANTATION,	FL	33324	2019 FEB -4
6. The name an (if changed):	d street address of the new registered a	gent (if changed) ar	nd /or registered or	
	Registered Agent Solutions	s, Inc.		
	155 Office Plaza Dr., Suite	 		
	Tallahassee, FL 32301	OT acceptable	· • • • • • • • • • • • • • • • • • • •	-
The street addrass changed will	ess of its registered office and the stre I be identical.	et address of the bu	usiness office of i	ts registered agent,
Such change wanthorized by t	as authorized by resolution duly adopt he board, or the corporation has been t	ted by its board of one of the control of the contr	directors or by an of the change.	officer so
/s/ Matt /	Kelly ure of an officer or director	Matt Kell	y lod or typed name and ti	President
l further agree performance of goent Or if th	t the appointment as registered agent of to comply with the provisions of all standard with and my duties, and I am familiar with and his document is being filed merely to re- that the corporation has been notified	atutes relative to the accept the obligate effect a change in the first thing of this continuations.	he proper and con tion of my position he registered offic change.	n as registered
567	marute of Registered Agent	12/20/20	18	
-	chaff of an entity:		Late	
Justine Karı	nell - Assistant Secretary			
1	Typed or Printed Name			