

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
☐ WAIT	<u></u>				
(Business Entity Name)					
(Document Number)					
Certificates	of Status				
Special Instructions to Filing Officer:					
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: KC SOBO Holdings, Inc.

Name of Corporation

DOCUMENT NUMBER: P13000029014

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 Sobolewski

Name of Contact Person

Firm/Company

1721 SW 54 Terrace

Address

Plantation, FL 33317

City/State and Zip Code

kcsobo@bellsouth.net

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

For further information concerning this matter, please call:

Kevin Sobolewski

,954

309-3565

2.4

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 ch	provisions of sections 607.0502, 617.0 ange is submitted for a corporation org er to change its registered office or reg	ganized under the laws of the State	of Florida
1. The name of	the corporation: KC Sobo Holdin	ngs, Inc.	
2. The principa	office address: 7366 NW 5th St	reet Plantation, Florida	a 33317
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 3/29/13	Document number: P1:	3000029014
	d street address of the current registered runent of State: (If resigned, enter resigned)		le with the
	Sobolewski, Kevin		
	1860 N Pine Island Rd Suite 108		APR
	Plantation, Florida 33322		
6. The name an (if changed):	d street address of the new registered a	gent (if changed) and /or registere	d office
	Sobolewski, Kevin		<u>報</u>
	7366 NW 5th Street		<u></u>
	Plantation, Florida 33317	OT acceptable	
The street addr as changed wil	ess of its registered office and the stred	et address of the business office	of its registered agent,
Such change wanthorized by	as authorized by resolution duly adopt he board, or the corporation has been i	ted by its board of directors or by notified in writing of the change.	an officer so
$-/\!\!\!/$	/11/11/1	Kevin Sobolewski Pr	
I hereby accept I further agree performance of	the appointment as registered agent of the appointment as registered agent of to comply with the provisions of all stopy of the standard with and the standard merely to restroy the province of the standard merely to restroy the complete merely the standard merely the complete merely the standard merel	atutes relative to the proper and I accept the obligation of my pos	complete ition as registered
	MMM	4/3/18	
Sig	gnature of Registered Agent	Date	
	ehalf of an entity:		
Kevin Sobe	Olewski 'vped or Printed Name		
ı	yped of Filined 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 * * *