MITCUCC2643 (Requestor's Name) (Address) 900302867949 (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL 09/28/17--01017--017 *+35.00 (Business Entity Name) (Document Number) Certified Copies _____ Certificates of Status ____ 2417 AUG 28 AM S: 40 Special Instructions to Filing Officer: ş Office Use Only



COVER LETTER

TO: Amendment Section **Division of Corporations** Kerr Electrical Repair Inc. SUBJECT: P 17000026434 **DOCUMENT NUMBER:**

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:

Erik Kerr Name of Contact Person Kerr Electrical Repair, Inc. 1910 NW 44 Street Address Pompano Beach, FL 33064 City/State and Zip Code E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

. .

Erik Kerr Name of Contact Person <u>454</u> <u>234-3745</u> Mea Code & Davtime 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

CR2E045 (03/12)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ TL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Kerr Electrical Repair, Toc
2. The principal office address: 1910 NW 44 St
Pompano Beach FL 33064
3. The mailing address (if different):
4. Date of incorporation/qualification: 12/23/1996 Document number: P17000026434
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) Title: $\frac{Kerr, Erick (Director)}{1910 MW 447^{th} St}$
<u> 1910 </u>
Pomparu Beach, FL 33064
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed): Kerr Erik (President)
1910 NW 44th St. =
Pompano Beach, FL 33064

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board. or the corporation has been notified in writing of the change.

Signature of an officer or director

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.

are of Registered Agent

Ø

If signing on behalf of an entity:

Typed or Printed Name

* * * F1LING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)