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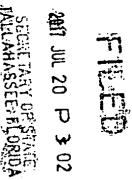
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: KBD PARANCES Name of Corporation	1
DOCUMENT NUMBER: P 17 0000383	13
The enclosed Statement of Change of Registered Office/Agent a	nd fee are submitted for filing.
Please return all correspondence concerning this matter to the fo	llowing:
Name of Contact Pers	on
KBD Partiers	INC
ZUINU WINCE Address	
JENSEN BEND FI	34957_
E-mail address: (to be used for future an	Sell South, NET
For further information concerning this matter, please call:	
Name of Contact Person at (A	777 631-5842 rea 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

Tallahassee, FL 32314

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 Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: KBD PARTNERS INC
2. The principal office address: 3187 NW FEGELAL HIGHWAY
JENSEN BEACH, F1 34957
3. The mailing address (if different): 455 WOOSWEW (INCLE
PAIN BEACK GANDEUS, Fl 33418
4. Date of incorporation/qualification: 4-37-17 Document number: \$\int 1700003\colon 373\$
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)
Elizabeth Ginello
455 (1)000 VIEW (100 La
Palm BEAch Grandwis, F1 33418
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
Lindu Cace
The state of the s
P.O. Box NOT acceptable
DEUSEU BEACH = 3495
1 PART 1
The street address of its registered office and the street address of the business office thits registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or an officer so authorized by the board, or the corporation has been notified in writing of the change in the change
Elizabeth Gianello - Owner Printed or typed name and title
Signature of an vincer of another state of the connective
I further during to comply with the provisions of an artistic fire of the remaining an equivalent
performance of my duties, and I am familiar with and accept the obligation of my position as registered 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.
Cencly (acc 5-1-17) Signatury of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314