93000050326

(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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(Bu	ısiness Entity Nar	ne)
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(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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m. Roberts JAN 0 8 2007

COVER LETTER

	ent Section of Corporations	
SUBJECT:	KENO ENTEXPLISES, (Name of Co	prporation)
	UMBER: <u>2930000503.</u>	
		•
Please return all co	orrespondence concerning this matter	to the following:
	CIGNETY HUGH	≅ √
	(Name of Con	tact Person)
	KEMO ENTERPRISE	1, /ACC.
	(Firm/Co	mpany)
	413 NED 6EN000	STREET
-	(Addr	css)
_	CHARLESTON, SC 299	K07
	(City/State and	d Zip Code)
For further inform	ation concerning this matter, please ca	ail:
<i>C160677</i> (No	Hul 6 Hes ame of Contact Person)	at (PK3) PIK PP 98 (Area Code & Daytime Telephone Number)
	00 check made payable to the Departr	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building
	1 .U. DUA UJ4/	Cinton Dullaing

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 tatement of change is submitted for a corporation organized under the laws of the State of
. The name of the corporation: KEND ENTEX PLISES, INC.
The principal office address: 413 WED 6 ENDOS STREET, CHARLESTON Sc 29407
The mailing address (if different):
Date of incorporation/qualification: 07/19/1993 Document number: P93000050326
The name and street address of the current registered agent and registered office on file with the Florida Department of State:
ENISE MOTO
660 LINTON BLVD., SUITE 207
DERAY BEALLY, FZ 33444
The name and street address of the new registered agent (if changed) and /or registered office (if changed):
LAW OFFICES OF POAM G. HEFNER, P.A.
1900 NN CORPORATE BOULEVARD, SUITE 301- WEST BUILDING
(P.O. Box NOT acceptable)
BOCA RATON, FL 33431
The street address of its registered office and the street address of the business office of its registered agent, s changed will be identical.
tuch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change.
(Signature of an officer or director) (Printed or typed name and title)
hereby accept the appointment as registered agent and agree to act in this capacity, further agree to comply with the provisions of all statutes relative to the proper and complete performance if my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this ocument is being filed merely to reflect a change in the registered office address, I hereby confirm that the orporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
F signing on behalf of an entity: Alam HCArev (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
CR2E045 (8/05)