

ALLEN W. LINDSAY, JR.* ROY V. ANDREWS T. A. LEONARD** J. JEFFERY SLINGERLAND LAURA JOYNER NYE *

October 23, 2001

(850) 623-3200 939-9095 FAX (850) 623-0104

REPLY TO: POST OFFICE BOX 586 MILTON, FLORIDA 32572

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*****25.88 *****25.80

* ALSO ADMITTED IN ALABAMA ** ALSO ADMITTED IN ALABAMA & CALIFORNIA

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

Re:

KPM Limited Company

Document #: Z00542

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or both for Limited Liability Company on the above-referenced company. Also enclosed is our firm check in the amount of \$25.00 to cover the cost of filing fees.

Please call me if you should have any questions or require additional information

Sincerely,

For the Firm

RVA/sla

Enclosures as stated.

cc:

Frank D'Amico

Rainer Wittich

Lester Waldmann

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited lia	bility company is: KPM I	imited Con	npany	
2. The mailing address of the New Orleans, LA	limited liability company is: 70113	622 Baror	ine Street	, 2nd Floor
March 05, 1992	-	Z00542		-
3. Date of filing/registration in	ı Florida	4. Document	number	<u> </u>
The name of the registered a Florida Department of State	gent and the registered office	address as show	vn on the record	s of the
	Gerald L. Brown			
	Name 601 South Palafox	Street		
	Pensacola, Address Pensacola, FL 325			•
	City, State and Z	-		-
6. The name and address of the	new registered agent and/or of	office:		
	Roy V. Andrews, Es	quire		-,
	Name 5218 Willing Stree	t	-	
Flo	rida street address (P.O. Box)	NOT acceptable	· ·	-
	Milton, FL 32570		المست. المراشق	SE 0_
	City, State and Zip			S 8
If the limited liability company confirmed that after the change and the business office of the re liability company, it is hereby conthe members of the limited liabilithe operating agreement of the limited liabilithe operating agreement of the limited liability company.	of changes are made, the Flor gistered agent will be identical onfirmed that the change(s) we lity company or as otherwise imited liability company.	ida street addres	is of the register	ed office
Frank J. DAM (Printed or typed name of signee)	ico JR.	- · · 	÷ . "	•
I hereby accept the appointmen comply with the provisions of all and I am familiar with and acce chapter 608. F.S. Or, if this do address, Thereby confirm that the (Signature of Registered Agent)	t as registered agent and agreed statutes relative to the prope of the obligations of my positive to the being filed to merely the limited liability company his	te to act in this c r and complete on as registered v reflect a chang as been notified		er agree to my duties, ded for in red office is change.
- Y - '				
// Division of C	orporations, P.O. Box 6327,	Tallahassee, F	L 32314	

FILING FEE: \$25.00

INHS18(10/99)