# 43000150236

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies \_\_ Certificates of Status\_ Special Instructions to Filing Officer:

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в. возтіск DEC **1 6** 2013

EXAMINER

#### COVER LETTER

TO: Registration Section
Division of Corporations

SURJECT: Perkins Ventures, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ryan King			
Name of Person			
ABA			
Firm/Company			
2631-A NW 41st Street			
Address			
Gainesville, FL 32606			
City/State and Zip Code			
rking@aba-advisors.com			

2618 DEC 13 PH 4: 3

For further information concerning this matter, please call:

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

Ryan King

...352

443-3532

Name of Person

Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

#### **MAILING ADDRESS:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## Enclosed is a check for the following amount:

■ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

# 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. Na	me of the limited liability company: Perkins Ventures, LLC			
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	96152 Marsh Lakes Drive Fernandina Beach, FL 32034		
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	96152 Marsh Lakes Drive Fernandina Beach, FL 32034		
10/24/20	13	L13000150236		
3. Da	te of filing/registration in Florida	4. Document number		
5. (a)	a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	Registered Agent:	Sammy Perkins		
	Registered Office Address:	263 MARSH LAKES DRIVE Fernandina Beach, FL 32034	ZEII DEL	
(b)	Enter name of NEW Registered Agent and/or NEW	WRegistered Office ad	SS	
	NEW Registered Agent:	n/a	<u> </u>	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	96152 Marsh Lakes Drive	<u> </u>	
MOST BE TECHIDA STREET ADDRESS		Fernandina Beach	,FL_32034	
confir and th liabili the me the op	limited liability company is not organized under the lamed that after the change or changes are made, the Flue business office of the registered agent will be identity company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise the serating agreement of the limited liability company.  The of a member of authorized representative of a member	orida street address of the case of a cal. Or, in the case of a was/were authorized by	he registered office Florida limited an affirmative vote of	
Sammy Printed	Perkins or typed name of signee	-		
Ac	eby accept the appointment as registered agent and as y with the provisions of all statutes relative to the provident amount of the provident	gree to act in this capac per and complete perfo ition as registered agen ely reflect a change in t has been notified in wr	ity. I further agree to rmance of my duties, nt as provided for in the registered office riting of this change.	
Signatu	re of Registered Agent			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00