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SECRETARY OF STATE
SECRETARY OF STATE

1.6.

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Brian's Pawn, LL	C . ed Liability Company	
	a ismonly 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:	
Brian Joan Antonio Name of Person		
Brian's Pawn, LLC.		70
274 North State Road	17	APPRU FILE 9FEB 27
margate, FL. 33063 City/State and Zip Code	·	PH 1:4
E-mail address: (to be used for future annual report	il. com	
For further information concerning this matter, please call	I:	
Brian San Antonio at Q	154) 968–3115 Area Code & Daytime Telephon	ne 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:		

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

1NHS18 (2/14)

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. No	ame of the limited liability company: Brian's Pawn LLC.
2. (a)	274 North State Road 7 (b) 274 North State Road 7 Principal office address of limited liability company: Mailing address of limited liability company:
	Margate FL. 33063. (Note: MUST BE STREET ADDRESS) Margate FL. 33063.
	Jan 20200039315.
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Brian J. San Autonio
(44)	Design of A year and Denis and Office shows on the records of the Florida Dent of States
	Registered Agent and Registered Office sides of the Frontial Expl. of State. Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	Tamarac Florida
	Tamarac, .FL 33319.
(b)	Tamarac, FL 33319. Talaia Perez Ingram.
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	9437 Satin Leaf PL.
	NEW Registered Office Address:
	Parkland FL 33076.
the ch	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ange or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
-was/w	rere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.
Sign	ature of a member or authorized representative of a member Printed or typed name of signee
provis the ob to mei	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely replect a change in the registered office address, I hereby confirm that the limited liability company has been writing of this change.
Signat	re of Registered Agent
	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

FILING FEE: \$25.00