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COVER LETTER

Division of Corporations	^
Estate of Isham McKinley Shar	pe, LLC
- · · · · · · · · · · · · · · · · · · ·	FLimited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Hunter Sharpe	
Name of Person	
Estate of Isham McKinley Sharpe, LLC	
Firm/Company	
2000 Presidential Way Apt. 501	
Address	
West Palm Beach/FL, 33401	
City/State and Zip Code	
huntersharpe13@gmail.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, plea	ase call:
Hunter Sharpe	561 225-6270
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 am	ount:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (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.	Na	ame of the limited liability company: Estate of Isha	m Mo	Kinley Shar	pe, LLC
2.	(a)	Hunter Sharpe		(b)	
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	N	Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		2000 Presidential Way #501		2000 Pre	esidential Way #801
		West Palm Beach, FL, 33401	_	West Pal	m Beach, FL, 33401
		October 7, 2013		L1300014	1404
3.		Date of filing/registration in Florida	4.	····	Document number
5.	(a)	Hunter Sharpe, member/manager			
٥.	(4)	Registered Agent and Registered Office shown on the records of t	he Flor	ida Dept. of State	:
		Registered Office Address (MUST BE FLORIDA STREET A	1DDRE	(SS)	<u>م</u> څوه
		2000 Presidential Way 801			王 遍
		West Palm Beach	3340	1	
		,10		<u>.</u>	
ļ	(b)				
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	address:	# JUN -1 71 12 70 70 70 70 70 70 70 70 70 70 70 70 70
					19 19 19 19 19 19 19 19 19 19 19 19 19 1
		NEW Registered Office Address:			
		2000 Presidential Way #501			
		West Palm Beach, FL, 33401	3340	1	
the age was the state of the st	e cha ent v is/we e arti Signa herei ovisi e obl mere tified	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable at authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member of authorized representative of a member by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this energy.	the reability of the limite	gistered office company, it is imited liability d liability com	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany. Jack Jack
Si	gnatu	re of Registered Agent	4		