

LO1000003241

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(Address)

(Address)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2015 DEC 28 PM 3:04

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N. Gulligan

DEC 30 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pro Tech USA LC

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:

Carlos Bernhardt

Name of Person

Pro Tech USA LC

Firm/Company

7009 E Country Highlands Dr

Address

Floral City/FL 34436

City/State and Zip Code

Adrienne@protechinternational.net

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

For further information concerning this matter, please call:

Adrienne Burkhart

Name of Person

at (970) 817-4924

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 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. Name of the limited liability company: Pro Tech USA LC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

322 Highway 3185

Thibodaux, LA 70302

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

7009 E Country Highlands Dr

Floral City, FL 34436

2/28/2001

L01000003241

3. _____
Date of filing/registration in Florida

4. _____
Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Carlos Bernhardt

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

676 Sudbrook Lane

Spring Hill, FL 34609

(b) _____
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Carlos Bernhardt

NEW Registered Office Address:

7009 E Country Highlands Dr

Floral City, FL 34436

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Adrienne Burkhardt

Signature of a member or authorized representative of a member

Adrienne Burkhardt

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Adrienne Burkhardt

Signature of Registered Agent

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

FILING FEE: \$25.00

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2015 DEC 28 PM 3:04
TALLAHASSEE, FLORIDA