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(Re	equestor's Name)					
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PICK-UP	☐ WAIT	MAIL				
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Certified Copies	_ Certificates	Certificates of Status				
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2019 FEB 25 AM II: 56

C. GOLDEN FEB 2 6 2019

COVER LÉTTER

ΓO: Registration Section Division of Corporations
SUBJECT: Exceletech Coding & Opplications, LCC 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:
LAUrence WUZIG Name of Person
Exactetan Charing & Applications, LLC
221 N HWY 27 Suite I Address
Clermint FL 34711 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (352) 394 3155 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

☐ \$55 Filing Fee & Certified Copy

☐ \$25 Filing Fee

Enclosed is a check for the following amount:



February 6, 2019

LAURENCE MUZIA 221 N HIGHWAY 27 SUITE I CLERMONT, FL 34711

SUBJECT: EXCELETECH COATING AND APPLICATIONS, LLC

Ref. Number: L03000001707

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent must sign accepting the designation.

The new registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

2019 FEB 25 AM II: 5

Letter Number: 919A00002639



January 26, 2019

LAURENCE MUZIA **221 N HIGHWAY 27** SUITE I CLERMONT, FL 34711

SUBJECT: EXCELETECH COATING AND APPLICATIONS, LLC

Ref. Number: L03000001707

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

The current name of the entity is as referenced above. Please correct your document accordingly.

The entity's date of incorporation/organization must be listed in the document.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 719A00001879



January 10, 2019

LAURENCE MUZIA 221 N HIGHWAY 27 SUITE I CLERMONT, FL 34711

SUBJECT: EXCELETECH COATING AND APPLICATIONS, LLC

Ref. Number: L03000001707

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The current name of the entity is as referenced above. Please correct your document accordingly.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Olaretha Golden Begulatory Specialist I!

Letter Number: 919A00000691

D.O. DOV 0007 Mallabases Planida 90014

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.

I. Na	me of the limited liability company: <u>Exceletect</u>	in Coc	Hing	and f	700/c	catins, c	۲
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		<u> 4a1 </u>		AT S	bility company:	
	Clerment FL		$C \setminus$	erment	\sim	<u> </u>	
		_ ·		Z.()	`		•
	34711	-		291	1		
3.	Ot 15 2003 Date of filing/registration in Florida	- 4.		03000 Document nu	-	107	
	2 2	! !		150201112111			
5. (a)	Registered Agent and Registered Office shown on the records of th	e Florida I	Dept. of St	— ate:			
	5064 SE PINEVNOLL Registered Office Address (MUST BE FLORIDA STREET AL	WA	1	_			
	Stuart Florida			_		2019	
	13	340	197		MULATIASSEE	##	
		· ·	.\\	_	32.	32	
(b)	LAURENCE MUZIA			_	Sec. 1	4	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	<u>)ffice addi</u>	ress:				
	291 N HWY 27				F.	MH : 56	
	NEW Registered Office Address:				,	0.	
	Clermint FL 31	171					
		·					
	, FL_			_			
the cha agent w was/we	mited liability company is not organized under the law; nge or changes are made, the Florida street address of t fill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	the regist bility cor the limit	ered offi npany, it ted liabil	ce and the busin is hereby confir ity company or a	ess office	e of the registered the change(s)	l
Signat	ure of a member or authorized representative of a member		<u>L AU</u>	Printed or typed	name of sig	ZIQ gnec	-
provision the obli- to merc	by accept the appointment as registered agent and agreen ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have been as change.	e to act i performa for in Ci ereby coi	in this ca nce of m hapter 60 nfirm tha	pacity. I further y duties, and I a. 15, F.S. Or, if th u the limited liat	r agree to m familia iis docum bility com	comply with the rwith and acceptent is being filed to the pany has been	f
Signatu	MNCE MWYCE of Registered Agent						

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