

LO3000037818-

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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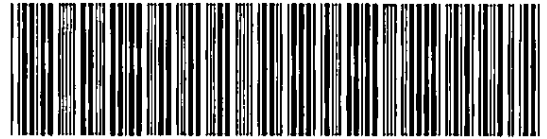
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 23, 2019

SHERRY LAMBSON-EISELE
800 N MAGNOLIA AVE STE 430
ORLANDO, FL 32803

SUBJECT: ARTESAN, LLC
Ref. Number: L03000037818

We have received your document for ARTESAN, LLC and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

This is a LLC the document you sent in is for a Corporation.

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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 619A00017523

**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: Artesan, LLC
2. (a) 737 W. Oak Street, Kissimmee, FL 34741 (b) 737 W. Oak Street, Kissimmee, FL 34741

Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

10/03/2003

L03000037818

3. Date of filing/registration in Florida 4. Document number

5. (a) Rumpa Amornmarn

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

737 W. Oak Street

Kissimmee, FL 34741

- (b) Sherry Lambson-Eisele, Esq.

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:

800 N. Magnolia Ave., Suite 430

Orlando, FL 32803

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.

[Signature]
Signature of a member or authorized representative of a member

RUMPA AMORN MARN

Printed or typed name of signee

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.

[Signature]
Signature of Registered Agent

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

FILING FEE: \$25.00

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