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SECRETARY OF STATE
TALL AHASSEE FLORING

J. HARRIS

## **COVER LETTER**

TO: Registration Section Division of Corporations	6,	<i></i> ;
SUBJECT: Pinellas 13	Name of Limited Liability Company	·
	Name of Limited Liability Company	
Dear Sir or Madam:	•	
The enclosed Registered Agent/Registere	ed Office Change and fee(s) are submitted fo	r filing.
Please return all correspondence concerns	ing this matter to the following:	,
Robert E. Lyons		
Name of Person		•
Pinellas 121eth AVE Firm/Company	enue, LLC	
PO Box 152		•
Address		
Largo, FL 33779		
City/State and Zip Co	ode	
Lyons_re@yahoo.com		,
E-mail address: (to be used for futur	e annual report notification)	
For further information concerning this m	atter, please call:	
Kenneth Arsenault	727 584-1199	
Name of Person	Area Code & Daytime	e 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 follo	wing amount:	
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified	д Сору

## - 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: Yinellu	<u>us 1</u>	alon	Avenue,1	10	
2. (a)	10225 Ulmerton Road	(b	DO Po	•		
ω. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(°	·/	Mailing address of limit	-	
	Suite 2					·
	Largo, FL 33771		Largo,	FL 33779		
	8-25-2004	_	LO	4000062	985	··· ; ,
3.	Date of filing/registration in Florida	4.		Document number	r	
5. (a)	Kenneth Arsenault					i
). (u)	Registered Agent and Registered Office shown on the records o	f the Florida	Dept. of Sta	ate:		
	10225 Ulmerton Road					
	Registered Office Address (MUST BE FLORIDA STREET	`ADDRESS	<u>n</u>			•
	Suite 2			¥.,	5., 2	,
	Largo, F	<sub>L</sub> 33771		·	NUL JUN	
					N 23	Contract Contract
(p)		1000	<del></del> _	<u> </u>	ر. اساسر،	Diedling 1
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	<u>a Office aa</u>	<u>aress</u> :		PES PES	Demock
	19535 Gulf Boulevard			_	S IMIE	Separate Sep
	NEW Registered Office Address:				<b>≯</b>	
	Suite E			<del>_</del>		
	Indian Shores	<sub>L</sub> 33785				į į
the cha agent v was/wa	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the reginability control of the limited in the l	stered offic ompany, it uited liabil	ce and the business of is hereby confirmed ity company or as of ompany.	office of the r I that the char	egistered ige(s)
Signa	ture of a member or authorized representative of a number			Printed or typed name	of signee	
provisi the obl to mer	by accept the appointment as registered agent and agents of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address, I d in writing of this change.	gree to act e perform ed for in ( hereby c	t in this ca ance of m Chapter 60 onfirm tha	pacity. I further agr y duties, and I am far )5, F.S. Or, if this do nt the limited liability	ree to comply miliar with a ocument is be ocompany ha	with the nd accept ing filed s been
Signatu	re of Registered Agent					