L0400068186

| (Requestor's Name) | | | | |
|---|--------------|-------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|---|
| Rechargeable Battery Expert, LLC SUBJECT: | |
| | nited Liability Company |
| Dear Sir or Madam: | |
| The enclosed Registered Agent/Registered Office Char | nge and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter | r to the following: |
| Vincent J Puglisi, PH.D, Managing Director | |
| Name of Person | |
| Rechargeable Battery Expert, LLC | |
| Firm/Company | |
| 2106 Chestnut Forest Dr | |
| Address | |
| Tampa, FI 33618 | |
| City/State and Zip Code | |
| vnpuglisi@verizon.net | , |
| E-mail address: (to be used for future annual repo | ort notification) |
| For further information concerning this matter, please of | call: |
| Vincent J Puglisi 8 | 13 746-5575 |
| 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 amoun | t: |
| ■ \$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

| . Na | ame of the limited liability company: Recharge | able Battery Ex | xpert, LLC |
|---|--|--|---|
| 2. (a) | Rechargeable Battery Expert, LLC | (b) | |
| (-) | Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | 2106 Chestnut Forest Dr | | |
| | Tampa, Florida, 33618 | | |
| | 9/20/2004 | L04 | 4000068186 |
| 3. | Date of filing/registration in Florida | 4. | Document number |
| 5. (a) | Puglisi, Vincent JDR | | |
| , (a) | Registered Agent and Registered Office shown on the recor | ds of the Florida Dept | ot, of State: |
| | Rechargeable Battery Expert, LLC | | DEC |
| | Registered Office Address (MUST BE FLORIDA STR. | EET ADDRESS) | SECRETARY VISION OF C |
| | 3009 Lynwood Ct | | |
| | Land O Lakes | FL 34638 | PORATIONS N 8: 37 |
| (b) | Rechargeable Battery Expert, LLC NEW Registered Office Address: | stered Office address | <u>s</u> : |
| | 2106 Chestnut Forest Dr | | |
| | 2 Too Oriconian Forces 21 | | |
| | Татра | _ _{FL} 33618 | |
| the chagent was/w he art Signal I here obto men | limited liability company is not organized under the ange or changes are made, the Florida street addrewill be identical. Or, in the case of a Florida limit were authorized by an affirmative vote of the membricles of organization or the operating agreement of the agreement of the member of a member of all statutes relative to the proper and complications of my position as registered agent as properly reflect a change in the registered office addressed in writing of this change. | ess of the registered ted liability comparers of the limited of the limited liability. | ed office and the business office of the register bany, it is hereby confirmed that the change(s) I liability company or as otherwise provided in ility company. Nicent J. Puglish Printed or typed name of signee this canacity. I further agree to comply with the |