

LC5 000006864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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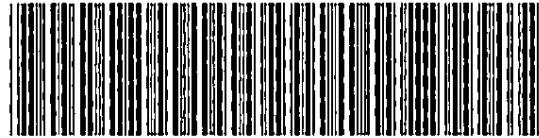
(Business Entity Name)

(Document Number)

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FEB 05 2021
S. YOUNG

2020 DEC 21 AM 7:10

FILED

COVER LETTER

Registration Section
Division of Corporations

SUBJECT: BERSONN, LLC
Name of Limited Liability Company

Mr or Madam:

Enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Return all correspondence concerning this matter to the following:

WINSTON C. BERNABE
Name of Person

BERSONN LLC
Firm/Company

54 S. RIDGEWOOD AVE
Address

MYRTLE BEACH FL 32114
City/State and Zip Code

stellemanon@gmail.com
Email address: (to be used for future annual report notification)

For information concerning this matter, please call:

WINSTON C. BERNABE at (845) 536-1169
Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**

Notwithstanding the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company makes the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company: BERSONN LLC

815 W. DAUGHTERY ROAD (b) 815 W. DAUGHTERY RD.

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

LAKE LAND FL 33809 LAKE LAND FL 33809

JAN 2005

Date of filing/registration in Florida

4.

L05000006864

Document number

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

934 S. RIDGEWOOD AVENUE

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

DAYTONA BEACH FL 32114

_____, FL _____

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

815 W. DAUGHTERY ROAD

NEW Registered Office Address:

LAKE LAND FL 33809

_____, FL _____

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the changes are made, the Florida street address of the registered office and the business office of the registered agent shall be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) is/are 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.

of a member or authorized representative of a member

WINSTON C. BERNABE
Printed or typed name of signee

I 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 responsibilities of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Registered Agent

2020 DEC 21 AM 7:10