

LD5000087155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

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J. SAULSBERRY
EXAMINER
NOV 27 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tropical Chem-Dry LLC.

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:

Jason McLaverty

Name of Person

Tropical Chem-Dry

Firm/Company

2341 Sw. Antiquera ST.

Address

Port St. Lucie Florida 34953

City/State and Zip Code

tropical.chemdry@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

jason mclaverty

Name of Person

at (772) 621-7182

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 amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: Tropical Chem-Dry LLC.

2. (a) Principal office address of limited liability company: Tropical Chem-Dry LLC.
(Note: MUST BE STREET ADDRESS)
2341 SW. Antiquerra St
Port St. Lucie Florida 34953

(b) Mailing address of limited liability company: same as above
(Note: MAY BE POST OFFICE BOX)

11-19-12
3. Date of filing/registration in Florida

L05000087155
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Department of State

Registered Agent: JASON MCLAVERTY

Registered Office Address: 100 SPRINGHILL DR.
JENSEN BEACH, FLORIDA 34957

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: JASON MCLAVERTY

NEW Registered Office Address:
(MUST BE FLORIDA STREET ADDRESS)
TROPICAL CHEM-DRY LLC.
2341 SW. ANTIQUERA ST.
PORT ST. LUCIE, FLORIDA 34953, FL.

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.

J. M. Hawley
Signature of a member or authorized representative of a member

JASON MCLAVERTY
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 608, 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.

J. M. Hawley
Signature of Registered Agent

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