

L05000094139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

L. SELLERS
DEC 31 2008
EXAMINER

Office Use Only



900138500469

12/11/08--01038--006 **35.00

FILED
08 DEC 30 AM 8:47
SEAL NOT A STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Shrijl Design, 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:

Karl E. Pearson, Esquire

(Name of Person)

Powell & Pearson LLP

(Firm/Company)

399 Carolina Avenue, Suite 100

(Address)

Winter Park, Florida 32789

(City/State and Zip Code)

For further information concerning this matter, please call:

Karl E. Pearson

(Name of Person)

at (

407)

647-5551

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 12, 2008

KARL E. PEARSON ESQ.
POWELL & PEARSON LLP
399 CAROLINA AVENUE, STE. 100
WINTER PARK, FL 32789

SUBJECT: SHRIJI DESIGN, LLC
Ref. Number: L05000094139

We have received your document for SHRIJI DESIGN, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 108A00060258

**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: Shriji Design, LLC
2. (a) Principal office address of limited liability company: 1770 Fennell Street
Maitland, Florida 32751
(Note: MUST BE STREET ADDRESS)
- (b) Mailing address of limited liability company: 1770 Fennell Street
Maitland, Florida 32751
(Note: MAY BE POST OFFICE BOX)
3. Date of filing/registration in Florida: 9/23/2005
4. Document number: L05000094139
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- Registered Agent: Gary F. Brock
- Registered Office Address: 2600 Maitland Center Parkway, #260
Maitland, Florida 32751
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
- NEW Registered Agent: Gary F. Brock
- NEW Registered Office Address: 1770 Fennell Street
(MUST BE FLORIDA STREET ADDRESS) Maitland, Florida 32751
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.


(Signature of a member or authorized representative of a member)

Gary F. Brock
(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.

(Signature of Registered Agent)

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

INHS18 (05/08)

FILED
08 DEC 30 AM 8:47
TALLAHASSEE FLORIDA
SECRETARY OF STATE