

LO5000112759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

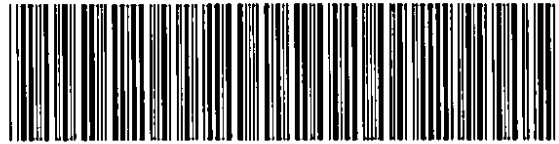
(Business Entity Name)

(Document Number)

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S. PRATHER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 28, 2018

MOLL PROPERTIES, LLC  
C/O TRACY MOLL  
3208 WESTCREEK CIRCLE  
COLUMBIA, MO 65203

SUBJECT: MOLL PROPERTIES, LLC  
Ref. Number: L05000112759

It has been called to our attention that the above named entity has designated TRACY MOLL as Registered Agent with an incorrect registered office.

We are asking you to file a change of registered office address with office to correct the filing error. The registered office must have a Florida street address.

Please complete the enclosed Statement of Registered Office or Registered Agent form. Return the completed form and appropriate fee to my personal and confidential attention. The address is listed below.

This letter is to be considered your 60 day notice that your entity will be subject to administrative dissolution or revocation if this error is not corrected by November 26, 2018.

If you have any questions concerning the filing of your document, please call (850) 245-6951.

Stacy Prather  
Regulatory Specialist III

Letter Number: 918A00020123

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Moll Properties, 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:

Tracy Moll  
Name of Person

Moll Properties, LLC  
Firm/Company

~~3203 Westcreek Cir~~ 511 E. Walnut St. #7573  
Address

Columbia, MO ~~65203~~ 65201  
City/State and Zip Code

tracy.moll@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tracy Moll at ( 813 ) 841-1462  
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 amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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. Name of the limited liability company: Moll Properties, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

10003 Connecticut St.  
Gibsonton, FL 33534

511 E. Walnut St. #7573  
Columbia, MO 65201

3. 11/16/2005 4. L05000112759  
Date of filing/registration in Florida Document number

5. (a) Tracy Moll  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

716 South Oakwood Ave  
Brandon, FL 33511

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

**NEW** Registered Office Address:

10003 Connecticut St.  
Gibsonton, FL 33534

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

Tracy Moll  
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 605, 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

**FILED**  
2018 NOV 26 PM 1:14  
CLERK OF STATE  
TALLAHASSEE, FL