

LO6 0000 44721

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

T. CLINE

MAY -9 2008

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2008

OLGA SMYLIE
1201 S WINTER GARDEN VINELAND RD
3-164
WINTER GARDEN, FL 34787

SUBJECT: ANTIOCH ENTERPRISES, LLC
Ref. Number: L06000044721

We have received your document for ANTIOCH ENTERPRISES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 908A00025207

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Antioch Enterprises
(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:

Olga Smylie
(Name of Person)

(Firm/Company)

1201 S Winter Garden Vineland Rd 3-164
(Address)

Winter Garden FL 34787
(City/State and Zip Code)

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For further information concerning this matter, please call:

Olga Smylie at (407) 654-0204
(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 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. The name of the limited liability company is: Antioch Enterprises
2. The mailing address of the limited liability company is: 1201 S Winter Garden
Vineland Rd # 3 - 164, Winter Garden FL 34787
3. Date of filing/registration in Florida 05/01/2006
4. Document number LO6000044721

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Small Business Resources USA, Inc
Name
773 S Kirkman Rd Su 118
Address
Deland FL 32811
City, State and Zip

6. The name and address of the new registered agent and/or office:

Osmund Ebanks
Name
14224 Reams Rd
Florida street address (P.O. Box NOT acceptable)
Windermere, FL 34786
City, State and Zip

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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.

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

OLGA SMYLJE
(Printed or typed name of signer)

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]
(Signature of Registered Agent)

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