L0600056156

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(only only only in the hy	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special instructions to Filing Officer:	
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SECRETARY OF STATE
TALL ABASSES FLORION

Office Use Only

COVER LETTER

Division of Corporations	
SUBJECT: Stay Safe LLC	
	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	g this matter to the following:
Rafael L. Torres	
(Name of Person)	·
Stay Safe LLC	
(Firm/Company)	
1721 1st Street East	•
(Address)	
Bradenton FLorida 34208	
(City/State and Zip Code)	
For further information concerning this mat	ter nlease call:
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Rafael Torres	at (_941) 276-9662
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following	ng amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LÍMITED 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.	Nai	ne of the limited liability company: Stay Safe L	LC		
2.	(a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: 1707 1st street East Bradenton FL 34208		
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1707 1st Street East Bradenton Fl 34208		
05	/25/2	2006	L06000056156		
3.	Dat	e of filing/registration in Florida	4. Document number		
5.	(a)	Registered Agent and Registered Office shown on	the records of the Florida Dep		
		Registered Agent:	Ralph Torres		E .
		Registered Office Address:	1707 1st Street East Bradenton FL 34208	AHASS	::::::::::::::::::::::::::::::::::::::
			ı		- Partie
	(b)	Enter name of NEW Registered Agent and/or NE	W Registered Office address	N:2	1
		NEW Registered Agent:	Rafael L. Torres	: 26 TATE: ORIDA	
NEW Registered Office Address:	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1721 1st Street East			
(MUSI BE FLURIDA SIREEI ADDRESS)		MUST BE FLORIDA STREET ADDRESSY	Bradenton	,FL <u>34208</u>	
th of he lia	at af fice reby bilited	imited liability company is not organized under the ter the change or changes are made, the Florida street of the registered agent will be identical. Or, in the confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company.	et address of the registered offi ase of a Florida limited liabilit	ice and the business	
K		or typed name of signee)	_		
I	Lup	by accept the appointment as registered agent and a with the provisions of all statutes relative to the provisions of all statutes relative to the provider with and accept the obligations of my position or, if this document is being filed to merely reflect a mythat the limited liability company has been notified to the limited liability company has been notified liability company has been notified liability company has been notified liability liab	ngree to act in this capacity. I oper and complete performant as registered agent as provide change in the registered office d in writing of this change.	further agree to ce of my duties, and ed for in Chapter 60 address, I hereby	I)8,
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00