L06000197134

(Re	questor'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:					





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03/24/14--01026--023 **35.8u



COVER LETTER

TO:

Amendment Section Division of Corporations

General Underground, LLC

Name of Corporation

.06000097134

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sherry Brown

Name of Contact Person

General Underground, LLC

Firm/Company

7650 NW 50th Street

Address

Chiefland, FL 32626

City/State and Zip Code

mssbrown@gmail.com

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

For further information concerning this matter, please call:

Karen Ross

Name of Contact Person

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 10, 2014

SHERRY BROWN GENERAL UNDERGROUND, LLC 7650 NW 50TH STREET CHIEFLAND, FL 32626

SUBJECT: GENERAL UNDERGROUND, LLC

Ref. Number: L06000097134

We have received your document for GENERAL UNDERGROUND, 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):

You have completed the wrong application. Please complete the attached form.

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

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 414A00007740

RFFT WFD

14 JUN -6 M ID 36

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.	Na	me of the limited liability company: General Undergo	ound,	ПС	
2.	(a)	Principal office address of timited liability company: (Note: MUST BE STREET ADDRESS)	. (t)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		7650 NW 50th Street	-	7850 NV	V 50th Street
		Chiefland, Fl. 32626		Chiefland	d, FL 32626
		10/01/2006		L06000097	7134
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	Arthur Palermo Jr., CPA, PA			_
	(-/	Registered Agent and Registered Office shown on the records of the	Florida	Dept, of Stat	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		9720 Stirting Road, Suite 203			
		Cooper City , FL 3	3024	· · · · · · · · · · · · · · · · · · ·	-
	(b)	Chris Brown Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Or</u>	flice sel	dress	14 JUN-6 PH 4: 36
		1280 Hamis of 11811 reconstructed regard amount 118211 reconstruction	<u> </u>	=17:17*	
		7650 NW 50th Street			
		NEW Registered Office Address:		· · · · · · · · · · · · · · · · · · ·	
					= 1
					
		Chiefland FL 3	2626		5
the age	cha ent v s/we	imited liability company is not organized under the laws inge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liab	of the ic regi ility co the lin	stered offic ompany, it i nited liabilit liability cor	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
_ <u>s</u>	ignal	ture of a member or authorized representative of a member			Printed or typed name of signee
pro the to i	ovisi obl merc tified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete po- igations of my postition as registered agent as provided in ely reflect a change in the registered office address, I he is in writing of this change.	e to ac erform for in (reby c	t in this cap ance of my Chapter 60, onfirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
		$\boldsymbol{\nu}$			