## L06000 103394

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## COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Daniels Welding LU Name of Limited I	Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and	I fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the	following:	
Terry Daniels Sr. Name of Person		
Daniels Welding LC Firm/Company		
4851 Dr. Markin Luther Kar Address	gJr. Blvd	
FOCE Mylvs FL 33905 City/State and Zip Code	<del></del>	
Temp Daniels 1234@icloud.com E-mail address: (to be used for future annual report noti	<u>)</u> fication)	
For further information concerning this matter, please call:		
Terry Daniels Sr. at (235) Name of Person	1) 671 - 1625 Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:		
□ \$25 Filing Fee	55 Filing Fee & Certified Copy	

INHS18 (2/14)

## 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.

i. Na	me of the limited liability company: Daniels Weld	ing UC
	Principal office address of limited liability company  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Fort Myers, FL 33905	
3.	Date of filing/registration in Florida  4.	LOOO103394 Document number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of S HARRY O. HENDRY	late:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 2164B WEST FIRST STREET	_
	FORT MYERS FL 33901	
(b)	Terry Daniels Enter name of NEW Registered Agent and/or NEW Registered Office address:	<u> </u>
	4851 Dr. Martin Luther King Jr. Bl NEW Registered Office Address:	vd
	Fort Myers, FL 33905	
change agent w was/we	mited liability company is not organized under the laws of the State of I or changes are made, the Florida street address of the registered office arill be identical. Or, in the case of a Florida limited liability company, it re authorized by an affirmative vote of the members of the limited liability corporation or the operating agreement of the limited liability corporation.	ind the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
/		Daniels Printed or typed name of signee
provision the obli- to mere	y accept the appointment as registered agent and agree to act in this cans of all statutes relative to the proper and complete performance of meant of my position as registered agent as provided for in Chapter of the reflect a change in the registered office address. I hereby confirm that in writing of this change.	macity. I further agree to comply with the

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