107000000918

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COVER LETTER

Division of Corporations			
SUBJECT: TILE IT UP AND MORE CLC 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:			
DANIEL KEILY	•		
Name of Person			
TUE TTUP AND MARRIELLE			
TILE IT UP AND MORE LLC Firm/Company			
	0		
12026 McKINNON Re	<u>X.</u>		
WINDERMERE, FL 34786 City/State and Zip Code			
DANIEL @ TIEITUPANDW E-mail address: (to be used for future annual report notificat	NORDICO W		
For further information concerning this matter, please call:			
DANIELKEIT at (904) 945-8463		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS:		
Division of Corporations	Registration Section Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	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.

-go., o. oo, , , , , , , , , , , , , , , ,	
1. Name of the limited liability company: TIEI	FTUPAND MORE LCC
2. (a) Principal office address of limited liability compa	ny: 12026 MckINNON Re
(Note: MUST BE STREET ADDRESS)	WINDERMERE, FC 34786
(b) Mailing address of limited liability company:	12026 Mc KINNON Rol
(Note: MAY BE POST OFFICE BOX)	WINDERMERE, FL 34786
11/13/2012 3. Date of filing/registration in Florida	<u>L07000000918</u> 4. Document number
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:
Registered Agent:	DANIECKETTY
Registered Office Address:	2626 SPRING PARK Rd JACKSMINIET FL 32209
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:
NEW Registered Agent:	DANIELKEIT
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	12026 MCKINHON Rel WINDERMERE, FL FL 34786
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as oth or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote terwise provided in the articles of organization my.
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to n address, I hereby confirm that the limited liability compa	proper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office iny has been notified in writing of this change.

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