

**L07000032678**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

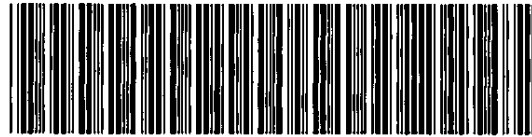
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



**700250552067**

10/30/13--01002--022 \*\*25.00

**FILED**

**2013 OCT 29 AM 10:32**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

OCT 30 2013

T. HAMPTON

*No \$*

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Crystal River Metal Recycling  
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:

Annie Hambach  
Name of Person

Crystal River Metal Recycling  
Firm/Company

806 Anclote Road  
Address

Tarpon Springs, FL 34689  
City/State and Zip Code

Annie.hambach@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erica Annie Hambach at ( 727 ) 938 2822  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
13 OCT 29 PM 2:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

September 12, 2013

ANNIE HAMBSCH  
806 ANCLOTE RD  
TARPON SPRINGS, FL 34689

SUBJECT: CRYSTAL RIVER METAL RECYCLING, LLC  
Ref. Number: L07000032678

We have received your document for CRYSTAL RIVER METAL RECYCLING, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton  
Regulatory Specialist III  
Registration/Qualification Section

Letter Number: 713A00021497

**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. Name of the limited liability company: Crystal River Metal Recycling  
2. (a) Principal office address of limited liability company: 4320 W Gulf to Lake Hwy  
Lecanto, FL 34461  
(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)

January 17, 2013  
3. Date of filing/registration in Florida

LO7000032678  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

ERIC, HAMBSCH

Registered Office Address:

806 ANCLOTE ROAD

TARPON SPRINGS, FL 34689

(b) Enter name of NEW Registered Agent and or NEW Registered Office address:

NEW Registered Agent:

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**) ✓

4320 W Gulf to Lake Hwy  
Lecanto FL 34461

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.

Signature of a member or authorized representative of a member

AMIE HAMBSCH  
Printed or typed name of signee

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 of Registered Agent

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