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Office Use Only



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2017 JUN-2 ANTI: 01
SECRETARY OF STATE

JIN O 5 2017 J. HARRIS

COVER LETTER

| TO: Registration Section Division of Corporations | | | | | | | |
|--|---|--|--|--|--|--|--|
| Sparky Bros LLC | | | | | | | |
| Name of Limited Liability Company | | | | | | | |
| Dear Sir or Madam: | | | | | | | |
| The enclosed Registered Agent/Registered Office C | Change and fee(s) are submitted for filing. | | | | | | |
| Please return all correspondence concerning this ma | atter to the following: | | | | | | |
| Kathy M Bryant | | | | | | | |
| Name of Person | ······································ | | | | | | |
| Sparky Bros LLC | | | | | | | |
| Firm/Company | | | | | | | |
| 12345 Starkey Rd Ste B | | | | | | | |
| Address | | | | | | | |
| Largo, FL 33773 | | | | | | | |
| City/State and Zip Code | | | | | | | |
| dlb103@gmail.com | | | | | | | |
| E-mail address: (to be used for future annual re | eport notification) | | | | | | |
| For further information concerning this matter, please | se call: | | | | | | |
| Dennis Bryant at | 727 639 3261 | | | | | | |
| 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 | | | | | | |
| 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.

| 1. N | ame of the limited liability company: Sparky Bros | LLC | | | | | |
|--|---|-----------------------------------|--|--|----------------------------------|---------------|-----------------------------|
| 2. (a) | | (| b) | | | | |
| (=) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | (| ·/ | Mailing address of li | mited lial | bility co | mpany: |
| | 12345 Starkey Rd Ste B | | Same | | | | |
| | Largo, FL 33773 | | | | | | |
| | 05/31/2007 | | L070000 |)57636 | | | |
| 3. ` | Date of filing/registration in Florida | 4. | | Document numb | per | _ | |
| 5. (a) | Registered Agent and Registered Office shown on the records of Kathy M Bryant Registered Office Address (MUST BE FLORIDA STREET) | | | | | | |
| | 2170 Sunnydale Blve Ste X | <u> 1DUKES.</u> | <u> </u> | | | | |
| | Clearwater | 33765 | | | | ~ | |
| (b) | Same Enter name of NEW Registered Agent and/or NEW Registered | Office ac | ldress: | _ | CRETARY OF | 2017 JUN-2 AM | |
| | NEW Registered Office Address: | | | _ | LORIDA | AM 11: 01 | Section 1 |
| | 12345 Starkey Rd SteB | | | | DE. | 0 | |
| | Largo, FL | 33773 | | - | | | |
| the charagent was/we the article Signature I hereb provision the oblice notified | mited liability company is not organized under the law need or changes are made, the Florida street address of rill be identical. Or, in the case of a Florida limited lie re authorized by an affirmative vote of the members of cless of organization or the operating agreement of the different process of a member of authorized representative of a member of a member of accept the appointment as registered agent and aground of a manufacture of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address. It is in writing of this change. | the reginability confirmated Kat | stered office ompany, it is inted liability control of the block of th | te and the business is hereby confirmed ty company or as of mpany. Printed or typed nare pacity. I further as | s office ed that to therwi | of the | registered ange(s) vided in |