

L070000069901

(Requestor's Name)

- Futuristorm LLC  
10795 Grant Way  
- Boynton Beach, FL 33437

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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(Business Entity Name)

(Document Number)

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10 JUN 28 PM 1:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN

JUN 29 2010

EXAMINER

**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.*

1. Name of the limited liability company: FutureStorm, LLC

2. (a) Principal office address of limited liability company: 10795 Grant Way  
☒ (Note: **MUST BE STREET ADDRESS**) Boynton Beach, FL 33437

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

07/03/2007  
3. Date of filing/registration in Florida

L0700006990  
4. Document number

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

Registered Agent:

WHEATON, CHRISTOPHER D  
5057 PINE ABBEY DRIVE SOUTH  
WEST PALM BEACH, FL 33415

Registered Office Address:

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

**NEW Registered Agent:**

Chris Wheaton

**NEW Registered Office Address:**  
**(MUST BE FLORIDA STREET ADDRESS)**

10795 Grant Way

Boynton Beach, FL 33437

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.

Chris Wheaton  
Signature of member or authorized representative of a member

Chris Wheaton

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.*

Chris Wheaton  
Signature of Registered Agent

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