

LD7000074844

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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**EXAMINER**

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Wallen Haulin LLC  
(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:

Spring Wallen  
(Name of Person)

Wallen Haulin LLC  
(Firm/Company)

3327 Cheviot Drive  
(Address)

Tampa, FL 33618  
(City/State and Zip Code)

For further information concerning this matter, please call:

Spring Wallen at (813) 833-5599  
(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  
AS per IRS letter they  
have previous check sent  
for 35.00

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 8, 2008

SPRING WALLEN  
3327 CHEVIOT DRIVE  
TAMPA, FL 33618

SUBJECT: WALLEN HAULIN LLC  
Ref. Number: L07000074844

We have received your document for WALLEN HAULIN LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

Please return 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) 245-6967.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 108A00053044



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Division of Corporations

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Leslie Sellers  
Regulatory Specialist II

Letter Number: 108A00053044

**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: Wallen Haulin LLC
2. (a) Principal office address of limited liability company: 3327 Cheviot Drive  
(Note: **MUST BE STREET ADDRESS**) Tampa, FL 33618
- (b) Mailing address of limited liability company: 3327 Cheviot Drive  
(Note: **MAY BE POST OFFICE BOX**) Tampa, FL 33618
3. Date of filing/registration in Florida: 07-19-2007
4. Document number: L07000074844
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- Registered Agent: United States Corporation Agents, Inc
- Registered Office Address: 13302 Winding Oaks Blvd  
Suite A-100  
Tampa, FL 33612-3425 US
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
- NEW Registered Agent:** Marcos Salen c/o Chase Cook
- NEW Registered Office Address:** 2223 N. Westshore Blvd  
(**MUST BE FLORIDA STREET ADDRESS**) Suite B-223  
Tampa, FL 33607

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.

Spring Yvette Wallen (mgr)  
(Signature of a member or authorized representative of a member)

Spring Yvette Wallen  
(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.

Chase P. Cook  
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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8 NOV -4 AM 8:54  
TALLAHASSEE FLORIDA  
DIVISION OF STATE