T08000013H40

(F	Requestor's Name)	
(<i>f</i>	Address)	<u></u>
()	Address)	<u> </u>
(0	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
. Certified Copies	Certificates of Statu	ıs
Special Instructions to Filing Officer:		

Office Use Only



300286559153

06/09/16--01007--007 **25.00



S Warren JUN 1 0 2016

COVER LETTER.

SUBJECT: Pr, + chard E	nviron medal		
Name of Lim	ited 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:			
Christine Pritzhard Name of Person			
Name of Person			
Pritchard Environmental LLC			
Firm/Company			
6138 Wood Creek Court			
Address .			
Jup, ter Fl. 334 City/State and Zip Code	58 		
City/State and Zip Code			
efprundaol an	$ \bigcirc $		
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please ca	11:		
Christne Pr, tchalat (5	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations		

P.O. Box 6327

Tallahassee, Florida 32314

☐ \$55 Filing Fee & Certified Copy

Clifton Building

\$25 Filing Fee

2661 Executive Center Circle

Enclosed is a check for the following amount:

Tallahassee, Florida 32301

Registration Section

Division of Corporations

TO:

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 lorida. Pritchard Environmenta Name of the limited liability company: 2. (a) (b) Mailing address of limited liability company: Principal office address of limited liability company: (Note: MAY BE POST OFFICE BOX) LO 8000012490 Date of filing/registration in Florida 3. Document number Registered Agent and Registered Office shown on the records of the Florida Dept. of State: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW** Registered Office Address: 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. Christine Pilchard Signature of a member or authorized representative of a member 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 605, 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