2080000037845

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•
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**25.00

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: JOHNSON BATTERY I (Name	DISTRIBUTORS LLC e of Limited Liability Company)	_ 6	3
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning	g this matter to the following:		
RICHARD JOHNSON (Name of Person)	TALL	2009	
JOHNSON BATTERY DISTRIBUTORS LLC (Firm/Company)	SECRETARY OF STATE ALLAHASSEE, FLORID	2009 APR 17 PM	コード・アフ
9470 ULMERTON RD STE 5A (Address)	FLORIDA	PM 4: 19	C
LARGO FL 33771		•	
(City/State and Zip Code)			
For further information concerning this mat	tter, please call:		
RICHARD JOHNSON	at (<u>727</u>) <u>581-9087</u>	_	
(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 followi	ing amount:		
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

• 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: <u>JOHNSON</u>	BATTERY DISTRIBUTORS LLC	_ 0
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 9470 ULMERTON RD STE 5A LARGO FL 33771	_ E
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME ZOS	_ 0
4-15-2008 3. Date of filing/registration in Florida	L08000037845 ARE	TE
5. (a) Registered Agent and Registered Office shown on		ED
Registered Agent:	TANIA LEMUS ORI DE CORRESPONDE	
Registered Office Address:	US CORP AGENTS INC 320 S FLAMINGO RD 347 PEMBROKE PINES FL 33027	- - -
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	
NEW Registered Agent:	RICHARD JOHNSON	_
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	9470 ULMERTON RD STE 5A	_
	LARGO ■ ,FL 33771	_
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	et address of the registered office and the busi- ease of a Florida limited liability company, it i	ness s
R i CHARD JOHNSON (Printed or typed name of signee)	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prain familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified.	ngree to act in this capacity. I further agree to oper and complete performance of my duties, as registered agent as provided for in Chapte change in the registered office address, I here d in writing of this change.	and I er 608, eby
(Signature of Registered Agent)		

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

INHS18 (05/08)