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COVER LETTER

TO:

TO: Registration Section Division of Corporations		
SUBJECT: Pelkey		
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:		
Sayde Hipsley Name of Person		
Pelkey Firm/Company		
1705 71st Stillet No		
Bradanty, F2 342 City/State and Zip Code	<u>9</u>	
E-mail address: (to be used for future annual repo	TOUTIENT NOT	
For further information concerning this matter, please call:		
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)		

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability submits the following statement in order to change its registered office or registered agent, or both, in the submit of the limited liability company:

[Name of the limited liability company:

[Note: MUST BE STREET ADDRESS]

[Note: MAY BE POST OFFICE B.]

[Note: MAY BE POST OFFICE B.]

[Note: MAY BE POST OFFICE B.]

3 Date of filing/registration in Florida Document number Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Office Address (MUST BE FLORIDA STREET ADDRESS) (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 a the change or changes are made, the Florida street address of the registered office and the business office of the reg agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provide the articles of organization or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member 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 we provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being notified in writing of this change. Signature of Registered Agent

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

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