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SECRETARY OF STATE

C. LEWIS

MAR 2 3 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Wild Freesia, LLC (Nam	e of Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	ng this matter to the following:	
Chrisjean Tiberti		
(Name of Person)		
Wild Freesia, LLC (Firm/Company)		
11105 Belle Meade Court		
(Address)		
Bradenton, FL 34209		
(City/State and Zip Code)		
For further information concerning this ma	atter, please call:	
Chrisjean Tiberti	at (941) 795 7897	
(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 follow	ving 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: Wild Free	esia, LLC
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	pany: 11105 Belle Meade Court Bradenton, FL 3409
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	same as above
September 10, 2008	L08000086245
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:
Registered Agent:	Ernest L Mascara
Registered Office Address:	721 First Avenue Nort St. Petersburg, FL 33701
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>I</u> <u>NEW Registered Agent</u> :	NEW Registered Office address: Chrisjean Tiberti
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	11105 Belle Meade Court Perico Island Bradenton ,FL 34209
If the limited liability company is not organized under that after the change or changes are made, the Florida's office of the registered agent will be identical. Or, in thereby confirmed that the change(s) was/were authoriz liability company or as otherwise provided in the article limited liability company. **Company of a member of a memb	the laws of the State of Florida, it is hereby confirmed street address of the registered office and the business he case of a Florida limited liability company, it is sed by an affirmative vote of the members of the limited es of organization or the operating agreement of the
Chrisjean Tiberti (Printed or typed name of signee) I hereby accept the appointment as registered agent are comply with the provisions of all statutes relative to the	nd agree to act in this capacity. I further agree to proper and complete performance of my duties, and I
am familiar with and accept the obligations of my posit F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been not	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, and I tion as registered agent as provided for in Chapter 608, et a change in the registered office address, I hereby ified in writing of this change.
Chusiean 1, beste	TALL 2009
(Signature of Registered Agent) Division of Corporations P O	Roy 6327 Tallahassee FL 32314

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

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