

LD8000088387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

SEP 15 2009

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BYO 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:

Troy Hawkins

Name of Person

BYO LLC

Firm/Company

3633 Westshore Blvd. S

Address

Tampa, FL 33629

City/State and Zip Code

byo1@verizon.net

E-mail address: (to be used for future annual report notification)

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09 SEP 14 PM 2:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Troy Hawkins

Name of Person

at ( 813 )

426-7518

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

**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: BYO LLC

2. (a) Principal office address of limited liability company: BYO LLC

☒ (Note: **MUST BE STREET ADDRESS**) 9260 Bay Plaza Blvd. Ste 504  
Tampa, FL 33619

(b) Mailing address of limited liability company: BYO LLC

☒ (Note: **MAY BE POST OFFICE BOX**) 9260 Bay Plaza Blvd. Ste 504  
Tampa, FL 33619

09/15/2008  
3. Date of filing/registration in Florida

L08000088387  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Department of State:

Registered Agent: Troy Hawkins

Registered Office Address: 9260 Bay Plaza Blvd. Ste 504  
Tampa, FL 33619

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent: Troy Hawkins

**NEW** Registered Office Address: 3633 Westshore Blvd. S  
(MUST BE FLORIDA STREET ADDRESS)  
Tampa, FL 33629

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.

Troy Hawkins  
Signature of a member or authorized representative of a member

TROY HAWKINS  
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.*

Troy Hawkins  
Signature of Registered Agent

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