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K. SALY APR 1 1 2017

COVER LETTER

Division of Corporations	ng en
ISHOP, LLC SUBJECT:	•
	f Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the following:
REINE D. JESEL	
Name of Person	
ISHOP, LLC	
Firm/Company	
10615 RESTORATION TERRACE	
Address	
BRADENTON, FLORIDA 34212	
City/State and Zip Code	
REINE@REINEJESEL.COM	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, plea	ase call:
REINE D. JESEL	941 748-7774
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 am	ount:
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

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 Florida.

1.	Na	ame of the limited liability company: ISHOP, LLC				
2.	(a)			b)		
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		1	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		10615 Restoration Terrace		10615 R	estoration Terrace	
		Bradenton, Florida 34212		Bradenton, Florida 34212		
		09/29/2008		L08000091957		
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 Office Address (MUST BE FLORIDA STREET ADDRESS)					
	10615 RESTORATION TERRACE					
		BRADENTON ,FL	34212	<u> </u>	A TO	
i	(b)	JESEL, REINE D			APR TO PH 1:59	
Enter name of NEW Registered Agent and/or NEW Registered Office address:					WILLIAM SEE, FLORIDA	
	NEW Registered Office Address:				-	
		10615 RESTORATION TERRACE				
	•					
		BRADENTON , FL	34212	<u> </u>		
the age was the S	cha nt v s/we arti ignat	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agreement of all statutes relative to the proper and complete	the regability of the linited RE	istered office company, it is nited liability liability con EINE D. JE	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in appany. SEL Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept	
the to n not	obl nere ified	igations of my position as registered agent as provided by reflect a change in the registered office address, I have a change in the registered office address, I have a change.	d for in hereby	Chapter 605 confirm that	, F.S. Or, if this document is being filed the limited liability company has been	