## L08000094326

(Re	equestor's Name)	
(Ad	ldress)	
	<del>,</del>	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		<u> </u> 

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations					
SUBJECT: Cheshire ( Name of Limit	attle Company LLC ted Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Change	e and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to	o the following:				
Raymond Cheshire Name of Person					
Cheshire Cattle Company Firm/Company	LLC				
295 N.W. Commons Loop Ste. 115	5-394				
Lake City FL. 3205 City/State and Zip Code					
gateway auction a wind str E-mail address: (to be used for future annual report	ream.net				
For further information concerning this matter, please cal	l:				
Channon M. Ruttedge at (8) Name of Person	13 ) 478-1835 Area Code & Daytime Telephone Number				
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enclosed is a check for the following amount:					
\$25 Filing Fee	S55 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	me of the limited liability company: _Chesh	ire	Cattle	Company	LLC
	inte of the finited money company.	(b)			
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			g address of limited liab e: MAY BE POST OF	
	4504 County Rd. 136 Live Oak, FL. 32060		295 N.W.	Commons Lo	op Ste. 115-3
	Live Oak, FL. 32060	<del></del>	Lake	City, E	L. 32055
	10/3/2008		L080	0000 94.	326
3.	Date of filing/registration in Florida	4.		ment number	
5. (a)	Registered Agent and Registered Office shown on the records of the	he Florida I	Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET A	INC (DDRESS)	<del> </del>		
	4345 E US Highw	ay_	90		
	Wellborn .fl	320	294	13.55	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office addi	<u>-ess</u> :	( /	1 ED
	Zeb Cheshire  NEW Registered Office Address:		<del></del>	Ç	19. E.
	871 N.W. Guerdon	<u>S+.</u>	<del>_</del>		
	Lake City .FL	320	)55_		
change agent w was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law or the operation of the law or th	registered bility con f the limit limited lia	office and the begins, it is hereled liability combility company.	business office of the by confirmed that the pany or as otherwise	he registered he change(s) se provided in
٠.	ture of <b>Sultimber of</b> authorized representative of a member by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I he				

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

notified in writing of this change.