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(Requestor's Name)						
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SECRETARY OF STATE

J. BRYAN

NOV 28 2011

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporat	ions		
SUB.	JECT:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Lawn Care LLC ed Liability Company	
Dear	Sir or Madam:			
The e	nclosed Registered Ag	ent/Registered Office	Change and fee(s) are	submitted for filing.
Pleas	e return all corresponde	ence concerning this r	natter to the following	y;
		en Sellers f Person		
	Tonys Lav	wn Care LLC	MALANIA MANAGAMAN MANAGAMAN	7. 21
	11177 Be	olla Loma Dr	·····	SECRETARY SECRETARY ALLAHASSEI
		FL 33774 nd Zip Code		2011 NOV 23 PH 1: 30 SECRETARY OF STATE TALLAHASSEE, FLORID
	tonyslawncare	999@yahoo.com future annual report notifica	ion)	DE DE
For fi	urther information conc	erning this matter, pl	ease call:	
	Stephen A. Se	llers at (727) Area Code & Day	729-2926 time Telephone Number
	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, Florida 32	ns Circle 301	MAILING ADDR Registration Section Division of Corpor P.O. Box 6327 Tallahassee, Florid	on rations
	Enclosed is a check \$25 Filing Fee	for the following am		& Certified Copy
	▼ \$25 I ming I co			~ common copy

INHS18 (5/08)

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:	Tonys Lawn Care LLC		
2.	(a) Principal office address of limited liability company	y: 11177 Bella Loma Dr		
	(Note: MUST BE STREET ADDRESS)	Largo, FL 33774	25 12 C	^
(t	(b) Mailing address of limited liability company:	11177 Bella Loma Dr 70 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	(Note: MAY BE POST OFFICE BOX)			
 3.	11/18/2008 Date of filing/registration in Florida	L0800010 4. Document number	6916	
5.	(a) Registered Agent and Registered Office shown on t	he records of the Florida	Dept. of State:	
	Registered Agent:	United States Corporation Agents, INC		
	Registered Office Address:	13302 WINDING OAKS BLVD. A-100 TAMPA, FL 33612 US		
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office add	ress:	
	NEW Registered Agent:	STEPHEN A. SELLERS		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		11177 BELLA LOMA DR		
		LARGO	,FL <u>33774</u>	
an lia of or	the limited liability company is not organized under the landifference that after the change or changes are made, the Fld the business office of the registered agent will be identibility company, it is hereby confirmed that the change(s) the members of the limited liability company or as other the operating agreement of the limited liability company	orida street address of the ical. Or, in the case of a I	e registered office Florida limited an affirmative vote	
€ig	nature of a member or authorized representative of a member			
****	STEPHEN A. SELLERS	-		
I l co. an Cr ad	nted or typed name of signee hereby accept the appointment as registered agent and a mply with the provisions of all statutes relative to the pro d I am familiar with and accept the obligations of my pos- capter 608, F.S. Or, if this document is being filed to mer dress, I hereby confirm that the limited liability company mature of Registered Agent	gree to act in this capacit oper and complete perfork sition as registered agent rely reflect a change in th has been notified in writ	y. I further agree to nance of my duties, as provided for in e registered office ing of this change.	

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

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