

L080000109783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

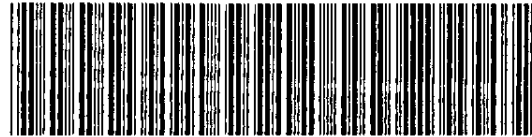
Special Instructions to Filing Officer:

L. SELLERS

MAR -1 2011

EXAMINER

Office Use Only



000195776340

02/24/11--01020--009 **25.00

FILED
11 FEB 24 PM 1:53
RECEIVED
FEB 24 2011
FBI - MEMPHIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Suggs Lawn Equipment, 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:

Barry G. Roderman, Esq.

Name of Person

Barry G. Roderman & Associates, P.A.

Firm/Company

500 West Cypress Creek, #550

Address

Ft. Lauderdale, FL 33309

City/State and Zip Code

bgr@barryroderman.com

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

For further information concerning this matter, please call:

Barry G. Roderman

Name of Person

at (954)

761-8810

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: Suggs Lawn Equipment, LLC

2. (a) Principal office address of limited liability company: 587 105th Avenue N, Unit 19

(Note: **MUST BE STREET ADDRESS**)

Royal Palm Beach, FL 33411
US

(b) Mailing address of limited liability company: 587 105th Avenue N, Unit 19

(Note: **MAY BE POST OFFICE BOX**)

Royal Palm Beach, FL 33411
US

11/24/2008
3. Date of filing/registration in Florida

L08000109783
4. Document number

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

Registered Agent: Suggs, Angela M

Registered Office Address: 572 W Rambling Drive
Wellington, FL 33414
US

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

NEW Registered Agent: Barry G. Roderman, Esq.

NEW Registered Office Address: 500 West Cypress Creek, #550
(MUST BE FLORIDA STREET ADDRESS)
Ft. Lauderdale, FL 33309

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.

Signature of a member or authorized representative of a member

Barry G. Roderman, Esq.

Printed or typed name of signer

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.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00