

LD9000019319

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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2021 JUN 24 11:12:02

2021 JUN 24 AM 8:43

FILED

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 878636 4311639

AUTHORIZATION :



COST LIMIT : \$ 25.00

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ORDER DATE : June 24, 2021

ORDER TIME : 10:16 AM

ORDER NO. : 878636-005

CUSTOMER NO: 4311639  
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CHANGE OF AGENT

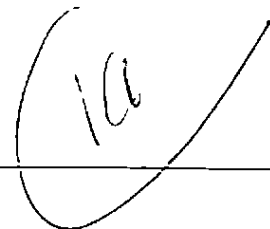
NAME: MASTER'S LUMBER & HARDWARE,  
LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER: \_\_\_\_\_



# 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. Name of the limited liability company: Master's Lumber & Hardware, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_

Principal office address of limited liability company:

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

10360 NW 53rd Street, Sunrise, Florida 33351

Mailing address of limited liability company:

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

10360 NW 53rd Street, Sunrise, Florida 33351

February 25, 2009

L09000019319

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:

Moncarz Law Firm PL

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

401 E Las Olas Boulevard, Suite #400

Fort Lauderdale, FL 33301

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

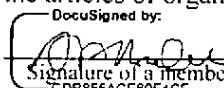
Corporation Service Company

**NEW Registered Office Address:**

1201 Hays Street

Tallahassee, FL 32301

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.

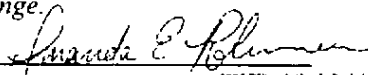
DocuSigned by:  
  
Signature of a member or authorized representative of a member  
CDB855ACE80F4CE

Derek A. McDowell

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 605, 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

FILED  
2021 JUN 24 AM 8:43  
CLERK OF CIRCUIT COURT  
TALLAHASSEE, FL