## L09000 21824

(Re	equestor's Name)				
(Ad	ldress)				
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(Ad	ldress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nam	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
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SEUNITARY OF STATE

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJECT: Myers Agency LLC					
	Name of	Limited	d Lial	bili	ity Company
Dear	Sir or Madam:				
The e	enclosed Registered Agent/Registered	Office (	Chan	ıge	and fee(s) are submitted for filing.
Pleas	e return all correspondence concernin	g this m	atter	to	the following:
	Gretchen K. Myers				_
	Name of Person				
	Myers Agency LLC				<del></del>
	Firm/Company				
	39 Forrest Ave.				_
	Address				
	Cocoa, FL 32922				<del></del>
	City/State and Zip Code				
<u>I</u>	MyersAgency@Live.con E-mail address: (to be used for future annual repor	1 t notification	on)	<u>,                                     </u>	
For fi	urther information concerning this ma	tter, ple	ase c	all:	:
	Gretchen Myers	at (	32	:1	704-8888
	Name of Person				Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:		N	MА	ILING ADDRESS:
	Registration Section		_		gistration Section
	Division of Corporations			_	rision of Corporations
	Clifton Building				. Box 6327
	2661 Executive Center Circle		Γ	Γall	lahassee, Florida 32314
	Tallahassee, Florida 32301				
	Enclosed is a check for the follow	ing amo	ount:	:	
	\$25 Filing Fee			\$5	55 Filing Fee & Certified 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.

Name of the limited liability company:	Myers Agency LLC			
2. (a) Principal office address of limited liability company	39 Forrest Ave.			
(Note: MUST BE STREET ADDRESS)	Cocoa, FL 32922			
(b) Mailing address of limited liability company:	39 Forrest Ave.			
(Note: MAY BE POST OFFICE BOX)	Cocoa, FL 32922			
March 5, 2009  3. Date of filing/registration in Florida	L09000021824 4. Document number			
. (a) Registered Agent and Registered Office shown on the 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			
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				
NEW Registered Agent:	Gretchen K. Myers			
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	39 Forrest Ave.			
MUSI BE FLURIDA STREET ADDRESS	Cocoa ,FL 32922			
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization			
Gretchen K. Myers	•			
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 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