

LO9000024623

(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:

Office Use Only



100163354801

12/07/09--01012--002 \*\*25.00

FILED  
09 DEC - 7 PM 12:12  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

T. HAMPTON  
DEC - 8 2009  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** INS Ventures  
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:

Oliver Inscoe

Name of Person

INS Ventures

Firm/Company

3425 S. Atlantic Ave. #1206

Address

Daytona Beach Shores, FL 32118

City/State and Zip Code

ojinscoe@gmail.com

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

For further information concerning this matter, please call:

Oliver Inscoe

Name of Person

at ( 404 )

219-6137

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: INS Ventures, LLC

2. (a) Principal office address of limited liability company: 3425 S. Atlantic Ave. #1206

☒ (Note: **MUST BE STREET ADDRESS**) Daytona Beach Shores, FL 32118

(b) Mailing address of limited liability company: 3425 S. Atlantic Ave. #1206

☒ (Note: **MAY BE POST OFFICE BOX**) Daytona Beach Shores, FL 32118

3/13/2009 File #L09000024623, Order #921231  
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:

Registered Agent:

Registered Office Address: Corporation Service Company  
1201 Hays Street  
Tallahassee, FL 32301

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

**NEW Registered Agent:** Oliver James Inscoe

**NEW Registered Office Address:** 3425 S. Atlantic Ave. #1206  
**(MUST BE FLORIDA STREET ADDRESS)** Daytona Beach Shores, FL 32118

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.

Oliver Inscoe  
Signature of a member or authorized representative of a member

Oliver Inscoe  
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.*

Oliver James Inscoe  
Signature of Registered Agent

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

**FILING FEE: \$25.00**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
DEC - 7 PM 12:11