## L09000025053

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## **COVER LETTER**

**Division of Corporations** SUBJECT: LA BRADLEY ENTERPRISES 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: Les A. Bradley II Name of Person LA BRADLEY ENTERPRISES LLC Firm/Company 1941 SW 64th Ct Address Miami, FL 33155 City/State and Zip Code labradleyii@me.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Les A. Bradley II at (\_786 ) 216-8877 Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: **■** \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy

TO: \* Registration Section

## 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: LA BRADLEY	ENTERPRISES LLC	
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	pany: 1941 SW 64th Ct Miami, FL 33155	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1941 SW 64th Ct Miami, FL 33155	
3/13/09	L09000025053	
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:	Les A Bradley II	
Registered Office Address:	1941 SW 64th Ct Miami, FL 33155	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent: <u>NEW Registered Office Address:</u> (MUST BE FLORIDA STREET ADDRESS)	NEW Registered Office add  Les A. Bradley I  1941 SW 64th Ct  Miami	ress: 05 12 22 22 25 3155
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member.  Les A. Bradley II	he laws of the State of Florida e Florida street address of the dentical. Or, in the case of a F e(s) was/were authorized by a crwise provided in the articles	a, it is hereby registered office
Printed or typed name of signee  I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address. Thereby confirm that the imited liability comp	nd agree to act in this capacit e proper and complete perfort o position as registered agent merely reflect a change in th pany 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