

LOG9000030118

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

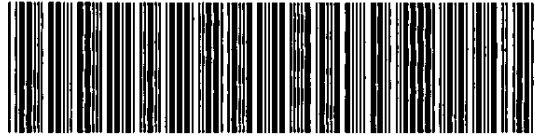
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000171863960

03/15/10--01026--016 **25.00

FILED

2010 MAR 15 PM 12:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

MAR 16 2010

EXAMINER

LOG-30118

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stephie Rockwell 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:

Stephanie Rockwell
Name of Person

StephieRockwell.com
Firm/Company

3140 Washington Road
Address

West Palm Beach, FL 33405
City/State and Zip Code

StephRockwell@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Rockwell at (561) 379-6011
Name of Person 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

FILED
2010 MAR 15 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Stephie Rockwell LLC

2. (a) Principal office address of limited liability company: Stephanie Rockwell
☒ (Note: **MUST BE STREET ADDRESS**) 3140 Washington Road
West Palm Beach, FL 33405

(b) Mailing address of limited liability company: _____
☐ (Note: **MAY BE POST OFFICE BOX**) _____

11/14/09
3. Date of filing/registration in Florida

no sure if I have the Right Number
72604417
4. Document number

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

Registered Agent:

The Company Corporation
2711 Center Pl
Wilmington DE 19808

Registered Office Address:

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

NEW Registered Agent:

Stephanie Rockwell

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

3140 Washington Road
West Palm Beach, FL 33405

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.

Stephanie Rockwell
Signature of a member or authorized representative of a member

Stephanie Rockwell
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.

Stephanie Rockwell
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00