To Page 2 of 4 Division of Corporations

e. 4

2019-04-05 11 30.32 PDT

LegalZoom.com, Inc. From: Laura Rodriguez Page 1 of 2



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190001135593)))



**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : LEGALZOOM.COM INC. Account Number : 120010000062 Phone : (323)962-8600 Fax Number : (323)962-3889 \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

SPEARIT GROUP LLC		
Certificate of Status	0	
Certified Copy	1	
Page Count	04	
Estimated Charge	\$55.00	

Electronic Filing Menu Corporate Filing Menu

Help

4/5/2019

https://efile.sunbiz.org/scripts/efilcovr.exe

34

٠.

## COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: SPEARIT GROUP 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:

Cheyenne Moseley

Name of Person

Legalzoom.com, Inc.

Firm/Company

101 N. Brand Blvd., 10th Floor

Address

Glendale, CA 91203

City/State and Zip Code

speargunbands@gmail.com

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

For further information concerning this matter, please call:

Cheyenne Moseley	800 773-0888 ext 9724
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 Enclosed is a check for the following a	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

□ \$25 Filing Fee

INHS18 (2/14)

\$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 605.0114 or 605.0116, Florida Statutes, the undersigned limited hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Nat	ne of the limited liability company:SPEARIT GI		
2. (1)	132 STARFISH COURT	(b) P.O.	BOX 2440
<u>. ()</u>	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MARCO ISLAND, FL 34145	MAR	CO ISLAND, FL 34146
	04/01/2009	L0900	00031599
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	SPIEGEL & UTRERA, P.A.		
• •	Registered Agent and Registered Office shown on the records of 1840 SW 22ND ST	'the Florida Dept. of	CState CRE +
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	4TH FLOOR		
	MIAMI . FI	33145	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 13302 WINDING OAK COURT, SUITE A <u>NEW</u> Registered Office Address:	d Office uddress:	
	TAMPAFI	33612	
the cha agent w was/we	mited hability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited for authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the registered of iability company of the fimited lie	office and the business office of the registered , it is hereby confirmed that the change(s) ability company or as otherwise provided in
-	40 - 1	JONATH	IAN BAILEY
l herel provisi the obl to mere notified	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provid- ely reflect a change in the registered office address. I fin writing of this change. CHEYENNE MOSELEY, ASSISTANT SECRETA STATES CORPORATION AGENTS, INC.	e performance o ea for in Chapte herchy confirm	Printed or typed name of signee s capacity. I further agree to comply with the f niv duties, and t am familiar with and accept r 605, F.S. Or, if this document is being filed that the limited liability company has been

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