

L09000038500

(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



400166332124

01/20/10--01017--013 **25.00

FILED
10 JAN 20 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
JAN 21 2010
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: American Business Technologies, 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:

Christine James

Name of Person

American Business Technologies, LLC

Firm/Company

P. O. Box 15323

Address

Panama City, FL 32406-5323

City/State and Zip Code

chris@abtsite.com

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

For further information concerning this matter, please call:

Christine James

Name of Person

at (850)

819-2437

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
10 JAN 20 AM 11:24
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: American Business Technologies, LLC

2. (a) Principal office address of limited liability company: 2812 W. 23rd Street, Suite A



(Note: MUST BE STREET ADDRESS)

Panama City, FL 32405-2364

(b) Mailing address of limited liability company:



(Note: MAY BE POST OFFICE BOX)

P. O. Box 15323

Panama City, FL 32406-5323

April 21, 2009

3. Date of filing/registration in Florida

L09000038500

4. Document number

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

Registered Agent:

Christine James

Registered Office Address:

15679 NW 46th Lane
Chiefland, FL 32626

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

NEW Registered Agent:

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

2812 W. 23rd Street, Suite A
Panama City, FL 32405-2364

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.

Christine James

Signature of a member or authorized representative of a member

Christine James

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.

Christine James

Signature of Registered Agent

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

FILING FEE: \$25.00