

L09000062981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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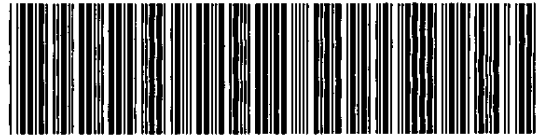
(Business Entity Name)

(Document Number)

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WASHINGTON, D.C. 20535

D. BRUCE

MAY 27 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COACH WORX, 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:

MICHAEL BELL

Name of Person

COACH WORX, LLC

Firm/Company

4501-B ULMERTON ROAD

Address

CLEARWATER, FL 33762

City/State and Zip Code

COACHWORX@VERIZON.NET

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

For further information concerning this matter, please call:

MICHAEL BELL

Name of Person

at (813)

416-9450

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 MAY 26 PM 2:39
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 18, 2010

MICHAEL BELL
4501-B ULMERTON ROAD
CLEARWATER, FL 33762

SUBJECT: COACH WORX, LLC
Ref. Number: L09000062981

FILED
10 MAY 26 PM 2:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for COACH WORX, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 210A00012566

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: COACH WORX, LLC

2. (a) Principal office address of limited liability company: 4501-B ULMERTON ROAD



(Note: **MUST BE STREET ADDRESS**)

CLEARWATER, FL 33762

(b) Mailing address of limited liability company: PO BOX 17926



(Note: **MAY BE POST OFFICE BOX**)

CLEARWATER, FL 33762

05/07/2010

2822495

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:

Corporation Service Company

Registered Office Address:

1201 Hays Street
Tallahassee, FL 32301

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

NEW Registered Agent:

RICHARD WELDON

NEW Registered Office Address:

101 MAIN STREET #A

(**MUST BE FLORIDA STREET ADDRESS**)

SAFETY HARBOR, FL 34695

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.


Signature of a member or authorized representative of a member

MICHAEL BELL

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.


Signature of Registered Agent

RICHARD WELDON

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

FILING FEE: \$25.00

FILED
MAY 26 PM 2:33
TALLAHASSEE, FLORIDA

(5-13-10)