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(Address)

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ALBRITTON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RIVER SPRINGS JEWELERS 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:

ROBYN D. HYDE

Name of Person

RIVER SPRINGS JEWELERS LLC

Firm/Company

3215 STEVENSON ST

Address

PLANT CITY, FL 33566

City/State and Zip Code

mlhyde2008@gmail.com

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

For further information concerning this matter, please call:

STEVEN L. SPARKMAN, ESQ. 813 759-1444  
at ( )  
Name of Person Area Code & Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

INH518 (2/14)

Note: A \$25 check is already in possession of the Division of Corporations (see attached copy of Letter Number 321A00018021).



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 1, 2021

ROBYN D. HYDE  
3215 STEVENSON ST  
PLANT CITY, FL 33566

SUBJECT: RIVER SPRINGS JEWELERS LLC  
Ref. Number: L09000097833

We have received your document for RIVER SPRINGS JEWELERS 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):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 321A00018021

**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 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: RIVER SPRINGS JEWELERS LLC
2. (a) 3215 STEVENSON ST  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
PLANT CITY, FL 33566
- (b) 3215 STEVENSON ST  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
PLANT CITY, FL 33566
3. OCTOBER 9, 2009 Date of filing/registration in Florida
4. L09000097833 Document number
5. (a) STEVEN L. SPARKMAN  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
1514 S ALEXANDER ST  
Registered Office Address (Note: **MUST BE FLORIDA STREET ADDRESS**)  
STE 108  
PLANT CITY, FL 33563
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  
3534 DOGWOOD VALLEY TRI  
NEW Registered Office Address:  
TALLAHASSEE, FL 32312

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.

Steven L. Sparkman  
Signature of a member or authorized representative of a member

STEVEN L. SPARKMAN  
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 605, 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.*

Steven L. Sparkman  
Signature of Registered Agent