

L100000008146

(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



900181883279

06/14/10--01018--012 \*\*25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 JUN 14 AM 11:22

T. HAMPTON  
JUN 15 2010  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** M.E. Engineering, 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:

David B Smitherman, PA  
Name of Person

\_\_\_\_\_  
Firm/Company

600 Bypass Drive, Suite 106  
Address

Clearwater FL 33764  
City/State and Zip Code

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

For further information concerning this matter, please call:

David B Smitherman at (727) 466-1456  
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

5/24/10

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Registered Agent Change of Address for L10000008146

To whom it concern:

This letter is in reference to a change of address for my registered agent on file for LLC L10000008146


The registered agent's address is a different suite number than the one previously filed and should read as follows:

David B Smitherman, P.A.  
600 Bypass Drive  
Suite 106  
Clearwater, FL 33764

Enclosed is a check for \$25.00 for changing his address.

Thank you for your assistance,

Sincerely,



S. S. Glassburn

cc: David B Smitherman, P.A.

**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: M.E. Engineering, LLC

2. (a) Principal office address of limited liability company: \_\_\_\_\_

☒ (Note: **MUST BE STREET ADDRESS**) 6163 126th Ave.  
Largo, FL 33773

(b) Mailing address of limited liability company: \_\_\_\_\_

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

2-23-10  
3. Date of filing/registration in Florida

L10000008146  
4. Document number

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

Registered Agent:

David B. Smitherman, P.A.

Registered Office Address:

600 Bypass Drive  
Suite 208  
Clearwater, FL 33764

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

**NEW** Registered Agent:

David B. Smitherman, P.A.

**NEW** Registered Office Address:

**(MUST BE FLORIDA STREET ADDRESS)**

600 Bypass Drive Suite 106  
Clearwater FL, FL 33764

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]  
Signature of a member or authorized representative of a member

S Glassburn  
Printed or typed name of signee

*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.*

D B Smitherman P.A.  
Signature of Registered Agent

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
JAN 14 AM 11:22