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(Requestor's Name)						
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	#)				
PICK-UP	TIAW	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificates	of Status				
Special Instructions to Filing Officer:						
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SECNETARY OF STATE

K. SALY MAR 26 2018

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJI	6724 LLC						
Name of Limited Liability Company							
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.					
Please	return all correspondence concerning this	s matter to the following:					
Walte	er Sowa, III						
	Name of Person						
The L	aw Office of Walter Sowa ,III						
	Firm/Company						
435 1	2th Street West						
	Address						
Brade	enton, FL 34205						
	City/State and Zip Code						
walte	r@sowalegal.com						
13	-mail address: (to be used for future annu	ial report notification)					
For fu	ther information concerning this matter,	please call:					
Walte	er Sowa	941 840-0820					
	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					
INHST	8 (2/14)						

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.	Na	me of the limited liability company: 6724 LLC			 :-	
י	(a)	8340 ULMERTON RD	(t	o)		
	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) #202	_ (~ <i>,</i>		ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		LARGO, FL 33771	- 			
		06/16/2010		L10	00006	4177
3.		Date of filing/registration in Florida	4.		Ţ	Document number
5.	(a)	CLENDENON, JOHN				
	()	Registered Agent and Registered Office shown on the records of the	ne Florid	а Бері	t. of State:	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
		11311 Upper Manatee River Road				2 ½ 6
		BRADENTON FI	34212			二
	(b)	WALTER SOWA, III, ESQ				FILED MR 23 PM 12: 40 MR 23 PM 12: 40 MR 1ATE MR 1ATE
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office ad	<u>Idress</u>	<u>;</u> ;	기위 곧 ㅁ
		435 OLD MAIN STREET				NIZ: 4
		NEW Registered Office Address:				<u> </u>
		SUITE 206				
		BRADENTON, FL	34205	-	····	
the age	echa ent v is/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of a will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regi bility c f the lin	istere ompa nited	ed office any, it is Hiability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
			W	ALTI	ER SO	
		ture of amember or authorized representative of a member				Printed or typed name of signee
pro the to no	herei ovisi ovisi nero tified	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I h I in writing of this change.	ee to ac perforn I for in crehy c	t in t iance Chap ionfu	his capa 2 of my d oter 605, rm that t	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been
χί	gnatu	re of Registered Agent				