

L10000 104514

(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



200269026252

02/05/15--01006--003 **25.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 FEB -5 PM 3:55

FEB 10 2015
T. CARTER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRAIG KOPKAU SERVICES 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:

CRAIG E KOPKAU SR

Name of Person

CRAIG KOPKAU SERVICES LLC

Firm/Company

3399 SHORE DRIVE

Address

LARGO, FL 33771

City/State and Zip Code

ckopkausr@gmail.com

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

For further information concerning this matter, please call:

Craig Kopkau at (727) 460-0207
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

INHS18 (2/14)

TO UPDATE
ADDRESS *

**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: CRAIG KOPKAU SERVICES LLC

2. (a) CRAIG KOPKAU SERVICES LLC

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

3399 Shore Drive

Largo, FL 33771

(b) _____

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

10/05/2010

L10000104514

3. Date of filing/registration in Florida

4. Document number

5. (a) CRAIG KOPKAU SERVICES LLC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

CRAIG E KOPKAU SR

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

200 N Garden Avenue

Clearwater, FL 33755

(b) CRAIG KOPKAU SERVICES LLC

Enter name of NEW Registered Agent and/or NEW Registered Office address:

CRAIG E KOPKAU SR

NEW Registered Office Address:

3399 Shore Drive

Largo, FL 33771

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 FEB - 5 PM 3:55

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.

Craig E Kopkau
Signature of a member or authorized representative of a member

CRAIG E KOPKAU
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 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.

Craig E Kopkau
Signature of Registered Agent