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COVER LETTER

TO: Registration Section Division of Corporations						
C&N Foundation Technologies, SUBJECT:	LLC					
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this m	atter to the following:					
Gavin D. Magaziner						
Name of Person						
Schuett Law Group						
Firm/Company						
8200 113th Street North, Suite 101						
Address						
Seminole Florida 33772						
City/State and Zip Code						
Info@schuett-law.com						
E-mail address: (to be used for future annual r	report notification)					
For further information concerning this matter, plea	se call:					
Gavin D. Magaziner	727 712-3663					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS:	MAILING ADDRESS:					
Registration Section	Registration Section					
Division of Corporations	Division of Corporations					
Clifton Building	P.O. Box 6327					
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314					
Enclosed is a check for the following amount:						
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					
INHS18 (2/14)						

EXAMPLE 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.

I. Na	ame of the limited liability company: C8	N Foundation T	echnok	ogies, LLC	
2. (a)	30427 Commerce Drive		(b) Pos	t Office Box 1207	7
(-,	Principal office address of limited liability (Note: MUST BE STREET ADDR		(0)		limited liability company: POST OFFICE BOXI
	San Antonio, Florida 33576		San	Antonio, Florida	33576
	April 6, 2011		L110	00041672	
3.	Date of filing/registration in Flo	orida 4.		Document num	ıber
5. (a)	Sheada Madani, Esquire				
J. (U)	Registered Agent and Registered Office shown on	the records of the Flor	ida Dept. c	of State:	
	Johnson Auvil Brock & Wilson, PA	A			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				F16 6
	37837 Meridan Avenue, Suite 10	0			
	Dade City	FL 3352	5		10000000000000000000000000000000000000
(b)	Gavin D. Magaziner, Esquire	-			7 PH
	Enter name of NEW Registered Agent and/or NE	W Registered Office	nddress		6 6
	Schuett Law Group				6: 08
	NEW Registered Office Address:				
	8200-113th Street North, Suite 10)1	· · · · ·		
	Seminole		2		
the charagent was/we the article of the control of	mited liability company is not organized nge or changes are made, the Florida strevill be identical. Or, in the case of a Flori re authorized by an affirmative vote of the cles of organization on the operating agree of a member of authorized representative of a more of a member of authorized representative of a more of a member of authorized representative of a more of all statutes relative to the proper authors of my position as registered agently reflect a change in the registered office in writing of this change.	et address of the re da limited liability he members of the li- ement of the limited number gent and agree to a nul complete perfor it as provided for it e address, I hereby	gistered of company imited lia d liability Jennifer act in this mance of a Chapter confirm	office and the busine, it is hereby confirmability company or as a company. Odom Printed or typed not capacity. I further a fire duties, and I am that the limited liability that the limited liability.	ass office of the register ned that the change(s) s otherwise provided in name of signee
	Division of Corporati	FILING FEE: S2		апа55cc, f L 34314	