1110000 57729

(Daniela de Mana)	
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
, , ,	
(Document Number)	
(Boodinow (Validos))	
Codification of Status	
Certified Copies Certificates of Status	·——
Special Instructions to Filing Officer:	





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2021 MAR 15 AM 8: 28
SECRETARY OF STATE

COVER LETTER

TO:	Registration Section Division of Corpor			
SUBJE	Falconhurst Ro	ad Consulting LLC		
		Name	of Limited I	Liability Company
Dear Si	ir or Madam:			
The end	closed Registered Ag	gent/Registered Offic	e Change and	d fee(s) are submitted for filing.
Please	return all correspond	ence concerning this	matter to the	following:
Daniel	Husted			
-	Na	me of Person		
	Fir	n/Company		<u> </u>
1969 S	W. Panther Trace			
	A	ddress		
Stuart,	FL 34997	-		
	City/St	ate and Zip Code	_	
dshuste	ed@hotmail.com			
E-	mail address: (to be	used for future annua	l report notif	īcation)
For furt	her information cond	erning this matter, pl	ease call:	
Daniel F	-fusted		772 at (233-9680
	Name of Per	rson		Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	ations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
ì	Enclosed is a check	for the following an	nount:	
{	\$25 Filing Fee		□ \$5	5 Filing Fee & Certified Copy

INHS18 (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.

I. N	ame of the limited liability company:				<u></u>					
2. (a)	1969 SW. Panther Trace		(b) _	1969 SV	V. Panther Trace	:				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)						
	Stuart, FL 34997		5	Stuart. F	L 34997	. 1 001	0111	<u>LL DON</u>	9	
			_				_			
	05/15/2011		LI	100005	7729					
3.	Date of filing/registration in Florida	4.		-	Document num	nber				
5 (a)	Jeffrey C Pepin									
5. (a)	Registered Agent and Registered Office shown on the records of 3418 Poinsettia Ave			ept. of Sta	ate:					
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRE:	<u>SS)</u>							
								2021		
	West Palm Beach	33407				-	<u> </u>	2021 HAR		
(b) .	Daniel Husted				_		HASSE	R 5	}	
	Enter name of NEW Registered Agent and/or NEW Registered	ed Office a	ddre	<u>:ss</u> :	_			A	· · · · · · · · · · · · · · · · · · ·	
	1969 SW. Panther Trace				_		Y OF STATE SEE, FLORIDA	8: 28	**************************************	
	NEW Registered Office Address:						, ≻			
	Stuart	34997			_					
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or mythe case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	aws of the register iability confithed in	red o omp nite	office ar any, it i d liabili	nd the business of is hereby confirm ty company or as	ffice oned th	of the i	register change	red :(s)	
		Da	niel	Husted						
I herei provisi the obl to mere notified	ture of Amenber of Anthorized representative of a member by accept the appointment as registered agent and agon on of fill statings relative to the proper and complete igations of myposition as registered agent as provide ely reflect a change in the registered office address. It is whiting of this change.	gree to ac e perforn ed for in hereby c	et in nanc Cha confi	this cap e of my pter 60. rm that	Printed or typed no acity. I further a duties, and I am 5, F.S. Or, if this the limited liabil			iply wi h and i s being has b	th the accept g filed een	