

L110000058527

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

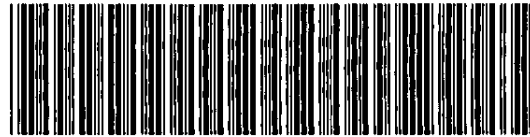
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TALLAHASSEE, FLORIDA

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J. SAULSBERRY  
EXAMINER

MAY 17 2012

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ASFL CONSULTING, LLC  
Name of Corporation

**DOCUMENT NUMBER:** L11000058527

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALLEN SANCHEZ  
Name of Contact Person

ASFL CONSULTING, LLC  
Firm/Company

725 83<sup>rd</sup> AVE N #103  
Address

ST. PETERSBURG, FL 33702  
City/State and Zip Code

tcob247@verizon.net  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

ALLEN SANCHEZ at 727, 492-8946  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: ASFL CONSULTING, LLC  
2. (a) Principal office address of limited liability company: 725 83<sup>rd</sup> AVE N #103  
ST. PETERSBURG, FL 33702  
(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company: \_\_\_\_\_  
(Note: **MAY BE POST OFFICE BOX**)

MAY 18, 2011  
3. Date of filing/registration in Florida

L11000058527  
4. Document number

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

Registered Agent:

CORPORATION SERVICE COMPANY  
ADAM COOPER

Registered Office Address:

1201 HAYS ST.  
TALLAHASSEE, FL 32301

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

**NEW** Registered Agent:

ALLEN SANCHEZ

**NEW** Registered Office Address:

**(MUST BE FLORIDA STREET ADDRESS)**

725 83<sup>rd</sup> AVE N #103  
ST. PETERSBURG, FL 33702  
FL

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.

Allen Sanchez  
Signature of a member or authorized representative of a member

ALLEN SANCHEZ  
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.*

Allen Sanchez  
Signature of Registered Agent

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

FILED  
MAY 6 AM 8:22  
TALLAHASSEE, FLORIDA  
DIVISION OF STATE