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(Re	questor's Name)					
(Ad	dress)					
(Address)						
(Cit	y/State/Zip/Phone #	<i>y</i>)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates o	of Status				
Special Instructions to Filing Officer:						

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EXAMINER

COVER LETTER

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TO:	Registration Section Division of Corporations						
SUBJE	Sells Real Estate LLC						
Name of Limited Liability Company							
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Offic	ce Change and fo	ee(s) are submitted for filing.				
Please	return all correspondence concerning this	s matter to the fo	dlowing:				
Richa	ard A Sells Sr						
	Name of Person	.	-				
Sells	Real Estate LLC						
	Firm/Company		-				
1260	1 Mountain Springs Pl						
	Address		_				
Trinit	y FL 34644						
	City/State and Zip Code		_				
sells1	1@yahoo.com						
E	E-mail address: (to be used for future annu	ial report notific	ation)				
For fur	rther information concerning this matter,	please call:					
Richa	ard A Sells Sr	727 at (647-4400				
	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	Regi Divi P.O.	stration Section sion of Corporations Box 6327 shassee, Florida 32314				
	Enclosed is a check for the following	amount:					
	\$25 Filing Fee	\$ 55	Filing Fee & Certified Copy				
INHS1	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	ume of the limited liability company: Sells Real Esta	ate, LL	C			
2.	(a)	Sells Real Estate, LLC	_ (b)	Sells Re	eal Estate, LLC		
	(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		2601 Mountain Springs PI		2601 Mo	untain Springs Pl		
		Trinity, FL 34655	_	Trinity, F	L 34655		
		06/07/2011	J	L1100006	66675		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	ROBERT F. DIMARCO, C.P.A. PA					
٠.	(4)	Registered Agent and Registered Office shown on the records of the	ne Florida	Dept. of State	:		
		ROBERT F. DIMARCO, C.P.A. PA			t-		
		Registered Office Address (MUST BE FLORIDA STREET A) 220 Pine Avenue N Suite A					
	(b)	Oldsmar , FL	34677		27		
		Richard A. Sells, Sr				平 8: 2	
		Enter name of NEW Registered Agent and/or NEW Registered Office address:			24		
		Richard A. Sells Sr.			ŕ		
		NEW Registered Office Address:					
		12601 Mountain Springs Pl		 			
		Trinity, FL	34655				
the ag wa the	e cha ent v is/we arti	imited liability company is not organized under the law ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the regis bility co the limi imited li	tered office mpany, it is ited liability	and the business office shereby confirmed that y company or as otherwine apany.	of the registered the change(s) se provided in	
	_	ture of a member or authorized representative of a member			Printed or typed name of sig		
pro the	ovisi 2 obl mere	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had d in writing of this change.	ee to act performa for in C ereby co	in this capa ince of my a Chapter 605, onfirm that t	icity. I further agree to luties, and I am familiar , F.S. Or, if this docume the limited liability comp	comply with the with and accept ent is being filed pany has been	

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