

L11000112193

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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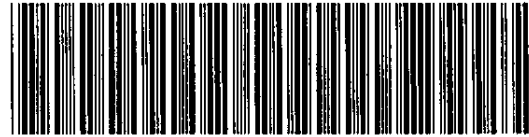
(Business Entity Name)

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AND
FILED

XNEMET 1
AUG 20 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LEGACY COMPONENTS, 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:

KEN ALVAREZ

Name of Person

LEGACY COMPONENTS, LLC

Firm/Company

3926 W. SOUTH AVENUE

Address

TAMPA, FLORIDA 33614

City/State and Zip Code

KEN@BUYGOODPARTS.COM

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

For further information concerning this matter, please call:

KEN ALVAREZ

at (813)

440-2679

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