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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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14 MAR 31 PM 3:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR 03 2014

C. CARROTHERS



**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Taylor'd Cabinets 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:

Dean Taylor

Name of Person

Taylor'd Cabinets LLC.

Firm/Company

1944 Harvest Way

Address

Middleburg FL 32068

City/State and Zip Code

Taylor'dcabinets@gmail.com

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

For further information concerning this matter, please call:

Dean Taylor

Name of Person

at ( 904 ) 813-5803

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



*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.*

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

Dean Taylor

2507 Richard CT  
Orange Park FL 32065

- DEAN Taylor

### 1944 Harvest Way

Middleburg FL 32068

FL

Signature of a member or authorized representative of a member

**Dean Taylor**

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.*

Signature of Registered Agent

INHS18 (05/08)