

L11000 121076

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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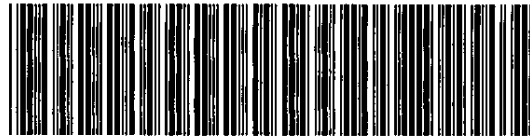
(Business Entity Name)

(Document Number)

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204/16



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 13, 2015

LAWRENCE TAYLOR  
LOCAL PUBLIC LIBRARY AGENCY SOLUTIONS, L  
8340 RIVERBOAT DRIVE  
TAMPA, FL 33637 US

SUBJECT: LOCAL PUBLIC AGENCY SOLUTIONS, LLC  
Ref. Number: L11000121076

We have received your document for LOCAL PUBLIC AGENCY SOLUTIONS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Carter  
Regulatory Specialist

Letter Number: 615A00005187

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Local Public Agency Solutions, 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:

Lawrence Taylor, Owner/Principal

Name of Person

Local Public Agency Solutions, LLC

Firm/Company

8340 Riverboat Drive

Address

Tampa, FL 33637

City/State and Zip Code

larry.taylor@localpublicagencysolutions.com

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

For further information concerning this matter, please call:

Lawrence Taylor at ( 813 ) 220-4513  
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

**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. Name of the limited liability company: Local Public Agency Solutions, LLC

2. (a) 8340 Riverboat Drive (b) 8340 Riverboat Drive

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Tampa, FL 33637

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

Tampa, FL 33637

October 24, 2011

L11000121076

3. Date of filing/registration in Florida

4. Document number

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

UNITED STATES CORPORATION AGENTS, INC.

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

13302 WINDING OAK COURT, Suite A

TAMPA, FL 33612

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

Lawrence Taylor

**NEW** Registered Office Address:

8340 Riverboat Drive

Tampa, FL 33637

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.

Lawrence Taylor  
Signature of a member or authorized representative of a member

Lawrence 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 605, 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.*

Lawrence Taylor  
Signature of Registered Agent