

L1100014044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

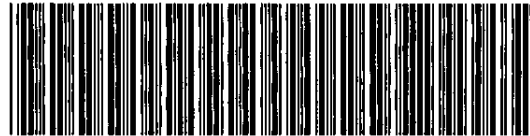
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13 JAN 23 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: On The Brink Affirmation Services
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:

Anthony Brinkley
Name of Person

On The Brink Affirmation Services
Firm/Company

11705 Boyette RD, Suite 442
Riverview FL 33569
Address

Riverview FL 33569
City/State and Zip Code

brizza1965@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anthony Brinkley at (813) 892-8849
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 18, 2012

ANTHONY BRINKLEY
11705 BOYETTE ROAD, STE. 442
RIVERVIEW, FL 33569

SUBJECT: ON THE BRINK AFFIRMATION SERVICES LLC
Ref. Number: L11000144044

We have received your document for ON THE BRINK AFFIRMATION SERVICES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6051.

Leslie Sellers
Regulatory Specialist II

Letter Number: 712A00029850

FILED
13 JAN 23 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

- Affirmation**
1. Name of the limited liability company: On The Brink Affirmation Services
2. (a) Principal office address of limited liability company: 11705 Boyette RD Suite 442
Riverview FL 33569
(Note: **MUST BE STREET ADDRESS**)
- (b) Mailing address of limited liability company: 11705 Boyette RD Suite 442
Riverview FL 33569
(Note: **MAY BE POST OFFICE BOX**)
3. Date of filing/registration in Florida: 27 Dec 2011
4. Document number: 11000144044
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- Registered Agent: J- Greenberg-Aguilar
- Registered Office Address: In Corp Services, Inc
Po Box 94438
Las Vegas NV 89193-4438
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
- NEW** Registered Agent: Anthony Brinkley
- NEW** Registered Office Address: 11705 Boyette RD Suite 442
Riverview FL 33569
(**MUST BE FLORIDA STREET ADDRESS**)

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.

Anthony Brinkley
Signature of a member or authorized representative of a member

Anthony Brinkley
Printed or typed name of signer

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.

Anthony Brinkley
Signature of Registered Agent

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