Liamolleage

(Requestor's Name)					
(Address)					
(Address)					
(Ci	ty/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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FILED 2015 SEP 24 P 12: SECRETARY OF STA

SEP 2 & 2015 BRUCE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Eagle Financial LLC		····
	Name of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	ed Office Change and fee(s) are submitted for filing.	
Please return all correspondence concern	ing this matter to the following:	
David F Ivy		
Name of Person		
Eagle Financial LLC		
Firm/Company		
110 East Broward Boulevard #	1 1700	
Address		2015 SECI
Fort Lauderdale, Floida 33301		2015 SEP 24 SECRETARY
City/State and Zip C	ode	
eaglefinancialllc@gmail.com		P D: FLOR
E-mail address: (to be used for future	re annual report notification)	RIDA
For further information concerning this m	natter, please call:	
David F Ivy	954 540-5856	
Name of Person	Area Code & Daytime Telep	hone Number
STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	S: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the follo	owing amount:	
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

INHS18 (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.

TOTICA	ma of the limited liability company. Eagle Financ	iaLLLC				
	Name of the limited liability company: (a) 110 East Broward Boulevard Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b) 110 East Broward Boulevard Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
2. (a)						
	Fort Lauderdale, Florida 33301		Fort Lauc	derdale,Florida 3330	1	
	February 3,2012		L1200001	6696		
3.	Date of filing/registration in Florida	– 4.		Document number		
e (~)	David F Ivy					
5. (a)	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of State	:		
	2741 Ocean Club Boulevard Suite 105		wood,Flori			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u></u>			
	2741 Ocean Club Boulevard Suite 105					
	Hollywood	33019				
	, FI			TA'S 2		
(b)				2015 : SECR ALLA	-	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office ad	ldress:	SEP 24 RETARY AHASSEE	11	
	Same			24 F RY OF SEE.		
	NEW Registered Office Address:			P 12: FLOR	Ö	
	110 East Broward Boulevard #1700			OF STATE E. FLORIDA		
	Fort Lauderdale , FI	_33301				
the cha agent v was/wa	imited liability company is not organized under the launge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the reginability control of the line limited	istered office ompany, it is nited liability	e and the business office is hereby confirmed that t y company or as otherwi	of the registered he change(s)	
Signa	Signature of a memoer or authorized representative of a member		Printed or typed name of signee			
provisi the obi to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ly reflect a change in the registered office address, I d in writing of this change.	ree to ac e perforn ed for in hereby c	et in this cape nance of my o Chapter 605 confirm that	acity. I further agree to duties, and I am familiar i, F.S. Or, if this docume the limited liability comp	comply with the with and accep ent is being filed cany has been	
Signatu	re of Registered Agent					