

LI2000018767

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

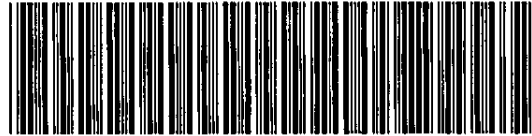
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200269024762

02/05/15--01017--001 **1375.00

APPROVED
AND
FILED
15 FEB -5 PM 1:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
FEB 11 2015
[Signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPOUDAZO 12, 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:

Kelly Hooper
Name of Person

BishopBeale
Firm/Company

250 North Orange Avenue, Suite 1500
Address

Orlando, FL 32801
City/State and Zip Code

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

For further information concerning this matter, please call:

Kelly Hooper at (407) 426-7702
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

