L 12000034335

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
BIVISION OF CORPORATIONS

C. LEWIS

DEC 1 3 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

_{surrect:} Tampa Bay Financial Group, 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:

Patrick M. Competelli

Name of Person

Tampa Bay Financial Group, LLC

Firm/Company

8812 Grand Bayou Ct.

Address

Tampa, FL 33635

City/State and Zip Code

tcompe1551@aol.com

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

For further information concerning this matter, please call:

Anthony L. Competelli

...**813**

786-4515

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 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.

1. Na	me of the limited liability company: Tampa Bay Financial Gr	oup, LLC	NIP DE
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		品 空
		Tampa, FL 33635	· · · · · · · · · · · · · · · · · · ·
			2 P
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	8812 Grand Bayou Ct.	7
		Tampa, FL 33635	?
			\
March 12, 2012		L12000034335	
3. Da	te of filing/registration in Florida	4. Document number	
5. (a	Registered Agent and Registered Office shown on the	he records of the Florida Dept. of	State:
	Registered Agent:	Patrick M. Competelli	1 PT RAYWALLA
	Registered Office Address:	8812 Grand Bayou Ct.	
	66	Tampa, FL 33635	
			<u></u>
	NEW Registered Agent:	Anthony L. Competelli 2193 Shoreline Dr.	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		3193 Shoreline Dr.	···········
	MOST DE LECRIDA GIRLEI ADDRESS	CLearwater FL	33760
confir and th liabili the me the op	limited liability company is not organized under the la med that after the change or changes are made, the Fle business office of the registered agent will be identity company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise rating agreement of the limited liability company.	orida street address of the registere cal. Or, in the case of a Florida lin was/were authorized by an affirma	ed office mited ative vote of
	L. Competelli or typed name of signee	-	
I here compl and I Chapt addre	by accept the appointment as registered agent and as y with the provisions of all statutes relative to the pro am familiar with and accept the obligations of my pos er 608, F.S. Or, if this document is being filed to mer ss, I hereby confirm that the limited liability company	ree to act in this capacity. I furth per and complete performance of ition as registered agent as provid ely reflect a change in the register has been notified in writing of thi	er agree to my duties, ded for in red office s change.

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