

L12000049731

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 10 2015
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PPM Outdoor, 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:

Caleb Flint

Name of Person

PPM Outdoor, LLC

Firm/Company

1730 Connecticut Ave.

Address

Saint Cloud, FL 34769

City/State and Zip Code

caleb_flint@hotmail.com

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

For further information concerning this matter, please call:

Caleb Flint

at (407) 738-1146

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

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TALLAHASSEE, FLORIDA

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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.

2. (a) 1730 Connecticut Ave

(b) PO Box 450711

(Note: MUST BE STREET ADDRESS)

Saint Cloud, FL 34769

(Note: MAY BE POST OFFICE BOX)

Kissimmee, FL 34745

L12000049731

4. Document number

5. (a) Caleb Flint

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1825 Sir Lancelot Circle

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

Saint Cloud, FL 34772

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

1730 Connecticut Ave.

Saint Cloud, FL 34769

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.

Caleb Flint

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.

Signature of Registered Agent

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