1200001

(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:						
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P/A Chy MAY 23 2014

R. WHITE



April 9, 2014

CHARLES R. LATSHAW 8812 SW 154TH TERRACE PALMETTO BAY, FL 33157

SUBJECT: ACRYLIC CONSULTING SERVICES, LLC

Ref. Number: L12000073901

We have received your document for ACRYLIC CONSULTING 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):

You have submitted the wrong form for filing.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 614A00007673

COVER LETTER

TO:

TO: Registration Section Division of Corporations		
SUBJECT: Acrylic Consulting Services,	LLC	
	of Limited	Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ce Change ar	nd fee(s) are submitted for filing.
Please return all correspondence concerning this	s matter to th	e following:
Charles R. Latshaw		
Name of Person		
Acrylic Consulting Services, LLC		
Firm/Company		
8825 SW 154th Terrace		
Address		
Palmetto Bay, FL 33157		
City/State and Zip Code		
Clatshaw1@yahoo.com		
E-mail address: (to be used for future annu	ial report not	ification)
For further information concerning this matter,	please call:	
Charles R. Latshaw	305	766-2835
Name of Person	at (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 INHS18 (2/14)		\$55 Filing Fee & Certified Copy
FEE PAID ON 3,	31/14.	CHECK # 1267. CASHER

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.

1. Na	ame of the limited liability company: Acrylic Consu	ulting servi	ces, LLC		
2. (a)	8825 SW 154th Terrace	(b) 8	(b) 8825 SW 154th Terrace		
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)_	Mailing address of limi (Note: MAY BE PO		
	Palmetto Bay, FL 33157		almetto Bay, FL 33157	7	
	June 4, 2012	— – L1:	2000073901		
3.	Date of filing/registration in Florida	4.	Document numbe	r	
5. (a)	Corporation Service Company				
J. (u)	Registered Agent and Registered Office shown on the records of	the Florida De	pt. of State:		
	Registered Office Address 1201 Hays Street	ADDRESS)		774 7	
	Tallahassee	32301		4	
(b)	Charles R. Latshaw Enter name of NEW Registered Agent and/or NEW Registered	l Office addres	<u>s</u> :		
	NEW Registered Office Address:				
	8825 SW 154th Terrace				
	Palmetto Bay	_33157			
the cha agent was/was/was the art Signa I here provis the obsto mer notifie	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the lange of a member or authorized representative of a member observed agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I din writing of this change.	f the register lability composite limited liab	ed office and the business pany, it is hereby confirmed liability company or as of ility company. CHACLES D. L Printed or typed name this capacity. I further as:	office of the registered that the change(s) therwise provided in ATSHAW are of signee	