L12000086413

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificate:	s of Status
Special Instructions to Filing Officer:		

Office Use Only



800250310998

08/07/13--01012---022 **\$5.00

SECRE GREY OF STATE TALLAHASSEE, FLORIDA

B. BOSTICK AUG **2 2** 2013

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Helping V Name of	Party, LLC of Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted	for filing.	
Please return all correspondence concernit	ng this matter to the following:		
NOIAN MOLEAN Name of Person			
Firm/Company 5942 Jamas Nr. W.	· .	20 TAL	
Jacksonville, FL 322 City/State and Zip Code Helping Uparty @ gn		013 AUG 21 PM 6: SEURENARY DE STA ALLAHASSEE, FLOR	# 1
Helping Uparty @ gn E-mail address: (to be used for future annual repo	mail, com	6: 15 1/47E ORIDA	**
For further information concerning this ma	,		
Nolan McLean	at (904) 607-6379		
Name of Person STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Area Code & Daytime Telephone MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	e Number	
Enclosed is a check for the follow	_		
□ \$25 Filing Fee	\$55 Filing Fee & Certified	Conv	

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.

agent, or both, in the state of Frontia.	
1. Name of the limited liability company: Helping	U Barty, LLC
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Jacksonville, FL 32244
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	5942 Jaguar Dr. W. Jacksonville, Fl 32744
6/28/2012	
3. Date of filing/registration in Florida 5	. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	United States Corporation Agents, Inc.
Registered Office Address:	13302 Winding Oak Court
	Snite A Tampa, FL 33612
proceedings and market	2013 ALL
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address 2
NEW Registered Agent:	Nolan D. McLears 2
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Jacksonville
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identic liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Nolan D. Mulean Printed or typed name of signee	ws of the State of Florida, it is hefeby orida street address of the registered office cal. Or, in the case of a Florida limited
I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the project and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mere address, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 8, 2013

NOLAN MCLEAN 5942 JAGUAR DRIVE W. JACKSONVILLE, FL 32244

SUBJECT: HELPING U PARTY, LLC

Ref. Number: L12000085413

2013 AUG 21 PM 6: 15

We have received your document for HELPING U PARTY, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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) 245-6051.

Letter Number: 313A00019027

Barbara Bostick Regulatory Specialist II

www.sunbiz.org