- LI2000087479

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COVER LETTER

	0	n of Corporations			Plenty	LLC.	
SUBJE	CT:	Potradaen	SOTANA	Mu	malli		
		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:

Michael Anthony Johnson Jr. Name of Person Plate of Platy Firm/Company 452 Lake bridge lane Ap+#421 Address Apop Ka, FL 32703 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

51 Kd

Michael A. Johnson Jr. at (321) 305-8245 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. Name of the limited liability company: Phtc. (F Plenty			
 (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>) 	452 Lake bridge lane Apt # 421, Apopka FC, 32703			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Malaa 581 N Park Ave, POBox: 1122 Apopka FL, 32712			
July 05, 2012 3. Date of filing/registration in Florida	<u>L12000087479</u> 4. Document number			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:			
Registered Agent:	Michael A. Johnson Jr.			
Registered Office Address:	452 Lake Bridge Lane Apt# 421, ApopKa PL, 32703			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				
NEW Registered Agent:	Crystal E. Johnson			
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	452 Lake bridge lane Apt # 421, ApopKa Fay, FL 32703			
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 wete 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. Signature of a member or authorized representative of a member Michoel A Johnson Jr.				
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company Signature of Registered Agent	gree to act in this capacity. I further agree to Sper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office v has been notified in writing of this change.			
Division of Corporations, P.O. Box 63	27. Tallahassee, FL 32314			

FILING FEE: \$25.00

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