L12000091783

(Re	questor's Name)					
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						

Office Use Only



200237715512

07/23/12--01019--008 **25.00

2012 JUL 23 AM 9: 30
SECHETARY OF STATIL
ALLAHASSEF, FI ORIO.

J. SAULSBERRY EXAMINER

JUL 24 2012

COVER LETTER

TO:	Registration Section Division of Corporations				
SUB	Tampa Teamwear LLC Name of Limited Liability Company				
Door	Sir or Madam:				
Dear	Sir or Madam:				
The e	enclosed Registered Agent/Registered	Office (Change	e and fee(s) are s	ubmitted for filing.
Pleas	e return all correspondence concernin	ng this m	atter to	o the following:	
	Andrew Wilson				
	Name of Person		•	····	
	Tampa Teamwear LLC				201 S TA!
	Firm/Company				1012 JUL 23 AM 9: 30 SECRETARY OF STAFE ALLAHASSEE, FLORID
					AKH AKH
	8717 Persea Ct.				SSE 23
	Address			 -	्रां 🛌
					PLS T
	T: "				
	Trinity, FL 34655				₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩
	City/State and Zip Code				r
	awilson@tampateamwear.	com			
- E	E-mail address: (to be used for future annual repor	rt notification	on)		
For fi	urther information concerning this ma	atter, ple	ase cal	11:	
	Andrew Wilson	at (727)	641-4054
	Name of Person				ne Telephone Number
	STREET/COURIER ADDRESS:		M.	AILING ADDRE	SS:
	Registration Section			gistration Section	
	Division of Corporations	Division of Corporations			
	Clifton Building		P.0	O. Box 6327	
	2661 Executive Center Circle		Ta	llahassee, Florida	32314
	Tallahassee, Florida 32301				
	Enclosed is a check for the follow	ving amo	ount:		
	\$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.

Name of the limited liability company:	Tampa Teamwear LLC			
2. (a) Principal office address of limited liability company	: 5205 S. Lois Ave			
(Note: MUST BE STREET ADDRESS)	Tampa , FL 33611			
(b) Mailing address of limited liability company:	8717 Persea Ct.			
(Note: MAY BE POST OFFICE BOX)	Trinity, FL 34655			
7/16/2012	CP-575-B			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:			
Registered Agent:				
Registered Office Address:	2772 Capwood Lane			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent:</u> <u>NEW Registered Office Address:</u>	W Registered Office address 99 30 Andrew R. Wilson 8717 Persea Ct.			
(MUST BE FLORIDA STREET ADDRESS)				
	<u>Trinity</u> ,FL <u>34655</u>			
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. Signature of a member or authorized representative of a member				
Andrew R. Wilson Printed or typed name of signee	_			
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provided and I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office y 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