

L12000105508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

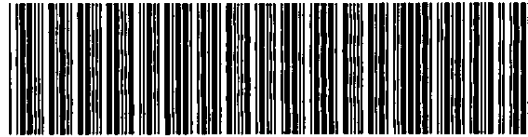
(Business Entity Name)

(Document Number)

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2013 JUN 26 PM 4:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*W*

JUN 27 2013

J. BRYAN



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 19, 2013

PAULA PAUTAUIROS  
PAUTAUIROS HOLDINGS LLC  
13401 MCCORMICK DR. SUITE B  
TAMPA, FL 33626

SUBJECT: PAUTAUIROS HOLDINGS LLC  
Ref. Number: L12000105508

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TALLAHASSEE, FLORIDA

We have received your document for PAUTAUIROS HOLDINGS 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 completed the wrong form

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) 245-6051.

Joey Bryan  
Regulatory Specialist II

Letter Number: 813A00015397

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Pautauros Holdings 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:

Paula Pautauros

Name of Person

Pautauros Holdings

Firm/Company

13401 McCormick Dr Ste B

Address

Tampa FL 33626

City/State and Zip Code

ppautauros@hotmail.com

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

For further information concerning this matter, please call:

Paula Pautauros

Name of Person

at ( 727 ) 239-1257

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

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: Pautauros Holdings LLC

2. (a) Principal office address of limited liability company: 13401 McCormick Dr  
Suite B  
Tampa, FL 33626

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)

13401 McCormick Dr  
Suite B  
Tampa, FL 33626

08/16/2012

3. Date of filing/registration in Florida

L12000105508

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Paula L Pautauros

Registered Office Address:

12410 Tarpon Springs Rd  
Odessa, FL 33556

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

NEW Registered Agent:

NEW Registered Office Address:  
(MUST BE FLORIDA STREET ADDRESS)

13401 McCormick Dr  
Suite B  
Tampa, FL 33626

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

Paula L Pautauros

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 608, 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**