## L12000118933

| (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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2013 FEB 27 PM 1: 32

J. SAULSBERRY EXAMINER

FEB 28 2013

## **COVER LETTER**

| TO: Registration Section Division of Corporations  |   |
|--|---|
| SUBJECT: MillER Tractor<br>Name o  | Service 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 concernir   | ng this matter to the following:  |
| Howard E. MillER Name of Person  |   |
| MillER Tractor Sev   | NICE, LLC   |
| 4501 Holloway Ros  | FEB 27 PM 1: 32 AHASSEEL FLORIDA  |
| PLANT City, FL. 3 City/State and Zip Code  | 3567  |
| E-mail address: (to be used for future annual repor  | nt notification)  |
| For further information concerning this ma   | atter, please call:   |
| Howard E. MillER Name of Person  | at ( <u>813</u> ) <u>695-4338</u><br>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 follow   | ving 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: Miller   | Tractor Service, LLC  |
|--|---|
| 2. (a) Principal office address of limited liability compar ( <i>Note: MUST BE STREET ADDRESS</i> )  | ny: 4501 Holloway Rd<br>Plant City, F1 33567  |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)   | 4501 Holloway Rd<br>Plant City, F1 33567  |
| SCPT, 17, 2012  3. Date of filing/registration in Florida  | <u>L12 000 1189 33</u><br>4. Document number  |
| 5. (a) Registered Agent and Registered Office shown or   | the records of the Florida Dept. of State:  |
| Registered Agent:  | Kelly Williams  |
| Registered Office Address:   | New Port Richey, F1 3465  |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent:   | EW Registered Office address:  Linda M. Miller  4501 Holloway Rd.   |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)  | Plant City ,FL 33567  |
| If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be ider liability company, it is hereby confirmed that the change (the members of the limited liability company or as otherwished operating agreement of the limited liability company.  However, W. Signature of a member or authorized representative of a member | Florida street address of the registered office   |
| Howard E. Miller Printed or typed name of signee   | PA PR   |
| Printed or typed name of signee  I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability company.  Signature of Registered Agent  | agree to act in this capacity. I further agree to roper and complete performance of my duties, sosition as registered agent as provided for in serely reflect a change in the registered office my has been notified in writing of this change. |