#12000124130

	Requestor's Name)	-
7)	requestors marrie)	
(A	Address)	
A)	Address)	
(C	City/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Nan	ne)
(E	Document Number)	
Certified Copies	Certificates	s of Status
Special Instructions t	to Filing Officer:	
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K. SALY EXAMINER

SEP 1 6 2013



September 6, 2013

BLUE ROBIN GUNS, LLC ROBERT DANNEMAN 4275 NE 19TH AVE. OCALA, FL 34479

SUBJECT: BLUE ROBIN GUNS, LLC

Ref. Number: L12000124130

We have received your document for BLUE ROBIN GUNS, 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):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Letter Number: 013A00021064

Karen A Saly Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Rame of Limited	Company 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 ma	atter to the following:		
Robert Dannew	<u>can</u>		
Blue Robin Couns, Firm/Company	the		
4275 NEIG AUC			
Ocala fh 34479 City/State and Zip Code			
6131330 Embarawai L. com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Robert Danneman at (3	352) 351-0830 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

	ment in order to change its registered office or registered
	Blue Robin Guns, LLC.
2. (a) Principal office address of limited liab (Note: MUST BE STREET ADDRE	ility company: AZ75 NE 19 AVE (SSS) Obala, FL 34479
(b) Mailing address of limited liability con (Note: MAY BE POST OFFICE BO	
Sept. 28, 2012 3. Date of filing/registration in Florida	1,200124130 4. Document number
5 0	ce shown on the records of the Florida Dept. of State:
Registered Agent:	UniTed STATES CORP. Aga
Registered Office Address:	13302 Winding OAK COUNT
	Tampa, fr 33612
(b) Enter name of NEW Registered Ager	nt and/or NEW Registered Office address:
NEW Registered Agent:	Robert Danneman
NEW Registered Office Address: (MUST BE FLORIDA STREET AD	00014 JFL 34474
confirmed that after the change or changes are	SEP T
Robert Danneman Printed or typed name of signee	SSEE FE
I hereby accept the appointment as registere comply with the provisions of all statutes rela and I am familiar with and accept the obligate Chapter 608, F.S. Or, if this document is being address, I hereby confirm that the limited liab Reference.	d agent and agree to act in this capacity. I further agree to attive to the proper and complete performance of his duties ions of my position as registered agent as provided for in no filed to merely reflect a change in the registered office oility 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