L12000/34420

(Requestor's Name)		
(Address)		
(Address)		
(City/	State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Name	e)
(Document Number)		
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SECRETARY OF STATE TALLATASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 10, 2015

THANKAMMA VARGHESE PO BOX 20693 BRADENTON, FL 34204-0693

SUBJECT: T & SONS, LLC Ref. Number: L12000134420

We have received your document for T & SONS, 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):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

The principal address must be at a street address. A post office box is not acceptable. Please correct section 2.

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) 245-6050.

Tina D Carter Regulatory Specialist

Letter Number: 315A00004877



COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: T& Son S Name of Lin	LLC nited 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:			
THANKAMMA VARBITESE Name of Person			
T& Sons, LLC			
Firm/Company			
6128 9th Ave Cir. NE			
Address			
BRADENTON FLORIDA 34212 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Thankamm & Vareites Eat (941) 209 - 7792 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 605.0114 or 605.0116, 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:	ons LLC
Name of the limited liability company: (2(a) — CI-NE GAPENTON Principal office address of limited liability company: 34212 (Noie:-MUST BE STREET ADDRESS)	6128 PAN Ave CIPUE BRADEN Mailing address of limited liability company:
(Note:-MUST BE STREET ADDRESS)	(Note: MAY BE POST OFFICE BOX)
10/22/2012	L12000134420
Date of filing/registration in Florida 4.	Document number
(5(a)) THANKAMINA VORGITESE (Registered Agent and Registered Office) shown on the records of the Florida De	pt. of State:
6128 9th Ave Cicle 1	<u>JE</u>
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	SEC 15.
00000	<u> </u>
BRADENTON, FL 3	2 677 m
(b) Thankama VORGFESE	当 2 月50
Enter name of NEW Registered Agent and/or NEW Registered Office addres	: 15 RIE
	<u>E</u>
NEW Registered Office Address:	
BRADENTON ,FL 30	4212
If the limited liability company is not organized under the laws of the Sta	ate of Florida, it is hereby confirmed that after
the change or changes are made, the Florida street address of the register agent will be identical. Or, in the case of a Florida limited liability comp was/were authorized by an affirmative vote of the members of the limited	any, it is hereby confirmed that the change(s)
the articles of organization or the operating agreement of the limited liab	ility company.
C Signature of a member or authorized representative of a member	Printed or typed name of signee;
I hereby accept the appointment as registered agent and agree to act in provisions of all statutes relative to the proper and complete performance the obligations of my position as registered agent as provided for in Cha to merely reflect a change in the registered office address, I hereby confinctified in writing af this change.	this canacity. I further garee to comply with the
Signature of Registered Agent	