112000137378

Office Use Only



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07/31/17--01041--005 **25.00

FILED

17 SEP 13 PH 4: 24

DIVISION OF CAST ATTENDA

O SIMMONS SEP 1 3 2017



Letter Number: 517A00015779

August 3, 2017

ALI SHASTI PO BOX 88799 SEATTLE, WA 98138

SUBJECT: PROFESSIONAL ENGINEERING SERVICES LLC

Ref. Number: L12000137378

We have received your document for PROFESSIONAL ENGINEERING SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

www.sunbiz.org

COVER LETTER

. .

TO:	Registration Section Division of Corporations							
SUBJI	Professional Engineering Services LLC							
Name of Limited Liability Company								
Dear S	ir 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:								
Ali Sh	nasti, PE, MSCE							
	Name of Person	·····						
Professional Engineering Services LLC								
	Firm/Company							
P. O.	Box 88799							
	Address							
Seatt	le, WA 98138							
	City/State and Zip Code							
a_sha	asti@yahoo.com							
E-mail address: (to be used for future annual report notification)								
For fur	ther information concerning this matter, p	please call:						
Ali Sh	asti, PE, MSEC	425 919 - 8592						
	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						

INHS18 (2/14)

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.

1. 1	Same of the limited liability company: Professional	Enginee	ring Serv	vices LLC		
2. (a	CORPORATION SERVICE COMPANY	(b)	Profess	ional Enginee	ring Services	LLC
- . (α	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of li (Note: MAY BE)	imited liability com <u>POST OFFICE B</u> C	
	1201 HAYS STREET		P. O. Bo	x 88799		
	TALLAHASSEE, FL 32301		Seattle,	WA 98138		
	10/29/2012		L120001;	37378		
3.	Date of filing/registration in Florida	4.		Document num	ber	
5. (a	M. Ali Shasti-Nazem					
J. (C	Registered Agent and Registered Office shown on the records of CORPORATION SERVICE COMPANY	the Florida	Dept. of State	e:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_		
	1201 HAYS STREET				بيہ 🖺	
	TALLAHASSEE	32301		-	St. A. St.	TI
	. FL	·		-	모 무	FILEI
(b	M. Ali Shasti-Nazem			_	ຶດ ເມ	m
,	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	_	PH	Ö
	18102 Diamond Cove Ct., Tampa, FL 3364	7		_	17 SEP 13 PH 4: 24	
	NEW Registered Office Address:				कि	
	18102 Diamond Cove Ct.			_		
	Tampa . FL	33647		_		
the cl agent was/v the a	limited liability company is not organized under the law hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liewere authorized by an affirmative vote of the members of ticles-of-organization or the operating agreement of the	the regis ability co of the limi limited li	tered office mpany, it is ted liabilit	e and the busines s hereby confirm y company or as npany. -Nazem	ss office of the r ned that the char otherwise prov	egistered ige(s)
Sigi	nature of a member or authorized epresentative of a member			Printed or typed na	ame of signee	
provi the o to me notifi	reby accept the appointment as registered agent and agrees ions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address. It is a change of this change. The content of Registered Agent	ree to act performa d for in C hereby co	in this cap ince of my hapter 602 nfirm that	acity. I further of duties, and I am 5, F.S. Or, if this the limited liabi	agree to comply familiar with a k document is he lity company ha	with the id accept ing filed s been

FILING FEE: \$25.00

INHS18 (2/14)

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314