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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Z.L.S. LLC  Name of Limit	ted Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change	e and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to	o the following:
Darrin D Ziegler Name of Person	<u>-                                     </u>
Z.L.S. LLC Firm/Company	<del></del>
192 Randle Ave.	ACE 201
Oak Hill, Al. 32759 City/State and Zip Code	
tamiziegler@/maj/, (E-mail address: (to be used for future annual report	Com notification)
For further information concerning this matter, please call	<b>,</b>
Darrin D Zieg Jer at (3) Name of Person	86) 314-7410 Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallabassee Florida 32314

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

Tallahassee, Florida 32301

\$25 Filing Fee

Enclosed is a check for the following amount:

## 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.

tionate.
1. Name of the limited liability company: 2, 4, 5, 44
2. (a) 1730 Fern Palm DR. Unit B Edgewater (b) 192 Randle Ave. Dak Hill, Fl 3275°  Principal office address of limited liability company: Note: MUST BE STREET ADDRESS)  1730 Fern Palm DR. 192 Randle ave,  Unit B Oak Hill, Fl 32759
Edgenates, F1 32132 2 12000143650  3. Date of filing/registration in Florida 4. Document number  5. (a) Mins, Jecone K11  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  192 Randle Ave.  Oak Hill ,FL 32759  (b) Darrin D Ziegler Enter name of NEW Registered Agent and/or NEW Registered Office address:  192 Randle Ave.  NEW Registered Office Address:
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 refresentative of a member  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 605, F.S. Or, if this document is being filed to merely reflect a chapte in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent