## L13000 011839

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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## COVER LETTER

TO: Registration Section

INHS18 (2/14)

Division of Corporations						
SUBJECT:	of Limited Li	L C lability Company				
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Offic	ce Change and	fee(s) are submitted for filing.				
Please return all correspondence concerning this	s matter to the	following:				
Omer C. Eyal						
Name of Person						
Nash More LLC Firm/Company		<del></del>				
6155 Linneal Beach Drive		<del>_</del>				
Forest City, FL 32703						
City/State and Zip Code						
remo@t6tactical.com						
E-mail address: (to be used for future annual	ual report notif	fication)				
For further information concerning this matter,	please call:					
Omer Eyal "Remo"	407 at (	252-8300				
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  $\epsilon f$  sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered  $\epsilon_s$  fice or registered agent, or both, in the State  $\epsilon f$  Florida.

. Na	me of the limited liability company:	Mor	More, LL C			
(a)	6155 Linneal Beach Drive	(b)	(b) 6155 Linneal Beach Drive			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		,	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  City, FL 32703		
	Forest City, FL 32703		Forest C			
	10/24/2018		L1800024	49665		
3.	Date of filing/registration in Florida	4.		Document number		
. (a)	BITMAN, RONNIE J					
5. (a)	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of State	- e:		
	255 Primera Blvd					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-		
	Suite 128			<b>201</b> SE		
	Lake Mary	32746		2019 DEC SECRE!		
(b)	Omer C. Eyal			ARY O		
(0)	Enter name of NEW Registered Agent and/or NEW Register	red Office ad	dress:			
	6155 Linneal Beach Drive			ISPEC -9 AM 10: 56 ECRETARY OF STATE TALLANDASSEE, FL		
	NEW Registered Office Address:			,		
	Forest City	FL 32703		<del>-</del>		
the cha agent v	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the case.	laws of the of the reginal Hiability cors of the lim	State of Fl stered offic ompany, it inited liabilit	is hereby confirmed that the change(s) by company or as otherwise provided in		
	20(1/		ner C. Eya			
Signa	sture of a member of authorized representative of a member			Printed or typed name of signee		
provis the ob- to mer	ty accept the appointment as registered agent and cions of all statutes relative to the proper and completigations of my position as registered agent as provied reflect a change in the registered of fice address d in writing of this change.					
Signati	are of Registered Agent					
•	Division of Corporations • P.C	) Roy 632	7∎ Tallaha	ssee, FL 32314		
		FEE: \$25				