

L13000013428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

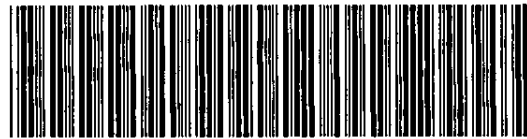
(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 DEC 23 PM 2:06

C.L.  
12-31-14



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 17, 2014

CHRISTIAN OSBURN / BIKE ABOUT TRAVEL, LLC  
1005 41ST AVE N  
ST PETERSBURG, FL 33703

SUBJECT: BIKE ABOUT TRAVEL, LLC  
Ref. Number: L13000013428

We have received your document for BIKE ABOUT TRAVEL, 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).

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis  
Regulatory Specialist II

Letter Number: 814A00026700

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Bike About Travel  
Name of Limited 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:

John christian Osburn

Name of Person

Bike About Travel

Firm/Company

1005 41st Ave N

Address

St. Petersburg, FL 33703

City/State and Zip Code

cosburn1@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christian Osburn

Name of Person

at ( 727 ) 525-0802

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)

Already sent check  
for 35 \$ per the enclosed  
letter.

**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. Name of the limited liability company: Bike About Travel LLC

2. (a) 2639 Dr. MLK JR. ST N

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

St. Petersburg, FL 33704

(b) 1005 41<sup>st</sup> Ave N

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

St. Petersburg, FL 33703

3. 25 January 2013  
Date of filing/registration in Florida

4. L13000013428  
Document number

5. (a) Archer Bay P.A.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2639 Dr. MLK Jr. St. N

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

St. Petersburg, FL 33704

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Billy K Osburn

NEW Registered Office Address:

1005 41<sup>st</sup> Ave N

St. Petersburg, FL 33703

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 representative of a member

John C. Osburn

Printed or typed name of signee

*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 change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Signature of Registered Agent

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