L13000024993

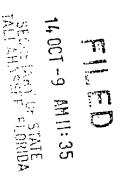
(Re	equestor's Name)	
(Ad	ldress)	
(Ac	idress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	nlv

10/9



700264147587

09/15/14--01056--010 **140.00



10-10-14 CRM ab3/14

COVER LETTER

SUBJECT: CONTINUUM COSTOM CONSTITUTION Name of Limited Liability Company Dear Sir or Madam:	<u>voita</u>
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:	
Terry R. Anderson	١ .
Name of Person	
Continuum Custom Construction, LLC Firm/Company	CT-9 AH
325 N. Orrando Ave	AH II: 35
Cocoa Beach, Fl 32931 City/State and Zip Code	
City/State and Zip Code	
Terry @ anderson custom creations, com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (407) 766-0468 Area Code & Daytime Telephone 1	 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 LIMITED 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.

Fioriad	·	~ `
l. Na	me of the limited liability company: Continuom Coston	n Creations, LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	-325 N. Ollando Auc	
	Cocoa Brach FL 32931	
	2-18-2013 L13	060624993
3.	Date of filing/registration in Florida 4.	Document number
5. (a)	TERRY ADDUSOD	_
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State	e:
,	376 N. Atlantic Ave "A"	-
• • • • • •	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
•	COCOA Beach, FL 32931	- -
	, FL,	- SE
· (b)	Terry Andryson	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:	5 7
•	325 N. ORLANDO AUC	3 3 11
	NEW Registered Office Address:	
		RATE S
$\mathcal{T}_{i_{n}}$	COCOA Beach, FL 32931	·
the charagent was/we the article Signat I hereb provisit the oblit to mere	mited liability company is not organized under the laws of the State of Florige or changes are made, the Florida street address of the registered office ill be identical. Or, in the case of a Florida limited liability company, it is re authorized by an affirmative vote of the members of the limited liability cles of organization or the operating agreement of the limited liability compare of a member of all statutes relative to the proper and complete performance of my gations of my position as registered agent as provided for in Chapter 605 by reflect a change in the registered office address, I hereby confirm that in writing of this change.	e and the business office of the registeres hereby confirmed that the change(s) y company or as otherwise provided in appany. R Auderson pres. Frinted or typed name of signee



September 23, 2014

Page 1

TERRY R. ANDERSON CONTINUUM CUSTOM CONSTRUCTION LLC 325 N ORLANDO AVE COCOA BEACH, FL 32931

SUBJECT: CONTINUUM CUSTOM CONSTRUCTION "LLC"

Ref. Number: L13000024993

We have received your document and check(s) totaling \$140.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The incorrect form was submitted.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 914A00020423

Division of Compositions D.O. DOV 6297 Wellshames Florida 2021