# L13000031394

(Re	questor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL MAIL		
(Ві	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
,				

Office Use Only



100276894461

09/10/15--01006--002 \*\*25.00

15 NOV -6 PM 4: 08

NOV 0 6 2015 Y SULKER

#### **COVER LETTER**

**;** ·

INHS18 (2/14)

TO: Registration Section

Divi	sion of Corporations			
SUBJECT:	3002HIGHWAY98BW, LLC			
	Name of Limited Liability Company			
Dear Sir or N	Madam:			
The enclosed	d Registered Agent/Registered Offi	ice Change and fe	e(s) are submitted for filing.	
Please return	all correspondence concerning the	is matter to the fo	llowing:	
PHILLIP B	BANE			
	Name of Person		•	
3002HIGH	IWAY98BW, LLC			
	Firm/Company	,	•	
3616 TAM	IIAMI TRAIL			
	Address		•	
PORT CH	ARLOTTE FL 33952			
	City/State and Zip Code		•	
unitedhme	e@aol.com			
E-mail	address: (to be used for future ann	ual report notifica	ition)	
For further in	nformation concerning this matter,	please call:		
Phillip Ban	ne	540 at (	397-4318	
	Name of Person	, .	Area Code & Daytime Telephone Number	
Regi Divi Clift 2661	EET/COURIER ADDRESS: Istration Section Istration of Corporations Istration Building I Executive Center Circle Inhance, Florida 32301	Regis Divis P.O.	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314	
Enel	losed is a check for the following	amount:		
<b>□</b> \$2	25 Filing Fee	<b>□</b> \$55	Filing Fee & Certified Copy	



### RECEIVED

15 NOV -6 PH 12: 40

## FLORIDA DEPARTMENT OF STATE Division of Corporations (

September 11, 2015

PHILL BANE 3616 TAMIAMI TRAIL PORT CHARLOTTE, FL 33952

SUBJECT: 3002HIGHWAY98BW, LLC

Ref. Number: L13000031394

We have received your document for 3002HIGHWAY98BW, 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 document is illegible and not acceptable for imaging.

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) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 215A00019272

## 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.

ame of the limited liability company:	AY98BW, LLC
3430 GARST MILL RD	<sub>(b)</sub> 3430 GARST MILL RD
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
ROANOKE VA 24018	ROANOKE VA 24018
Date of filing/registration in Florida  Philip Bace  Registered Agent and Registered Office shown on the records of	4. Document number  the Florida Dept. of State:
3430 Garst Mill Rb Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)
Roanoke, FI	24018
PHILLIP BANE	15 x
Enter name of NEW Registered Agent and/or NEW Registered 3616 TAMIAMI TRAIL	ASSE - 6
NEW Registered Office Address:	PH 4: 08  E. FLORIB
PORT CHARLOTTE , FI	33952
ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members igles of organization or the operating agreement of the sture of a member or authorized representative of a member by accept the appointment as registered agent and agent agent and agent a	ws of the State of Florida, it is hereby confirmed that after f the registered office and the business office of the registered ability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in a limited liability company.  Philip Bayer  Printed or typed name of signee  Tree to act in this capacity. I further agree to comply with the aperformance of my duties, and I am familiar with and accepted for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  ROANOKE VA 24018  Date of filing/registration in Florida  Philip Bane  Registered Agent and Registered Office shown on the records of Registered Office Address  MUST BE FLORIDA STREET  PHILLIP BANE  Enter name of NEW Registered Agent and/or NEW Registered 3616 TAMIAMI TRAIL  NEW Registered Office Address:  PORT CHARLOTTE  Imited liability company is not organized under the la ange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members in the street address of organization or the operating agreement of the appointment as registered agent and agent a