L13000072367

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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TALLAHASSEE, FLORIDA

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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	L Pasco Funding LLC ECT:	
	; Name of	Limited Liability Company
Dage 9	Sir or Madam:	
The er	Pasco Funding LLC Name of Limited Liability Company r Sir or Madam: enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. assertum all correspondence concerning this matter to the following: All Street Seo LLC Name of Person Firm/Company 39 South Rd Address w Port Richey Fl 34652 City/State and Zip Code meinvestmentsfl@gmail.com E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle P.O. Box 6327 Tallahassee, Florida 32314	
Please		
Main	Street Seo LLC	
	Name of Person	
	Firm/Company	
5139	South Rd	
	Address	,
	Port Richey FI 34652	
	City/State and Zip Code	
prime	einvestmentsfl@gmail.com	
I	E-mail address: (to be used for future annual	report notification)
For fu	rther information concerning this matter, plea	ase call:
		Area Code & Daytime Telephone Number
	CTD SCHOOL OVER A NODEGO	MAN INC. ADDRESS
	Clifton Building	P.O. Box 6327
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
	Enclosed is a check for the following am	ount:
	☑ \$25 Filing Fee	□ \$55 Filing Fcc & Certified Copy
INHSI	8 (2/14)	

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

a)	5139 SOUTH RD	y: South RD Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)				
NEW PORT RICHEY FL 34652			NEW PORT RICHEY FL 34652		
			<u> </u>		
	1/14/2015	L	13000072367		
	Date of filing/registration in Florida	4.	Document numb	er	
a)	NSN LLC				
-	Registered Agent and Registered Office shown on the record	ds of the Florida D	ept. of State.		
	7419 US HIGHWAY 19				
	Registered Office Address	EET ADDRESS)			
			s to Ts	PAGE 18	
	NEW PORT RICHEY	, FL_34652		CHETAIN CANTAINS	
) <u>.</u>	MAIN STREET SEO LLC		•	SEE THE	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	tered Office addre	228:	S CATE	
	NEW Registered Office Address:	B-Wasanaan			
	5139 SOUTH RD				
	NEW PORT RICHEY	. FL 34652	A wight of the		

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.

Printed or typed name of signee

Signature of Registered Agent

Signature of a member of authorized representative of a member