# L13000112471

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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**Z. Desch**, NOV 1 3 2013

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: A&G HOLDINGS OF FLORIDA LLC

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:

# Filomena Ore

Name of Person

### A&G HOLDINGS OF FLORIDA LLC

Firm/Company

PO BOX 51741

Address

Sarasota FL 34232

City/State and Zip Code

eketyao@hotmail.com

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

For further information concerning this matter, please call:

## Filomena Ore

.941

2250022

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 of sections 608.416 or 608.508, 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. Na	me of the limited liability company: A&G Holdings of Florida	LLC	
2 (a) Principal office address of limited liability cor	Principal office address of limited liability company:	2154 Ivy Place	7.26 <b>7.3</b>
(u)	(Note: MUST BE STREET ADDRESS)	Sarasota FL 34235	2 3 71
			2 L
(b) Mailing address of limited liability company:	Mailing address of limited liability company:	PO BOX 51741	m m
	(Note: MAY BE POST OFFICE BOX)	Sarasota FL 34232	
			ANTE TO THE TOTAL PROPERTY OF THE PROPERTY OF
11/07/20	· · · · · · · · · · · · · · · · · · ·	L13000112471	<u>&gt;</u> ω
3. Da	te of filing/registration in Florida	<ol> <li>Document number</li> </ol>	er
5. (a	Registered Agent and Registered Office shown on the		orida Dept. of State:
	Registered Agent:	Filomena Ore	· · · · · · · · · · · · · · · · · · ·
	Registered Office Address:	3469 Clark Rd Apt 267	
	Registered Office Address.	Sarasota FL 34231	
		· · · · · · · · · · · · · · · · · · ·	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office	e address:
	NEW Registered Agent:	Filomena Ore	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		2154 tvy Place	
	NICOL BELLEVILLE IN THE STATE OF THE STATE O	Sarasota	,FL 34235
confir and the liabilithe m the op	limited liability company is not organized under the larmed that after the change or changes are made, the Flore business office of the registered agent will be identify company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwisterating agreement of the limited liability company.	orida street address	of the registered office
Filomena	a Ore	_	
- 1101110111			
	or typed name of signee		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00