

L13000122362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

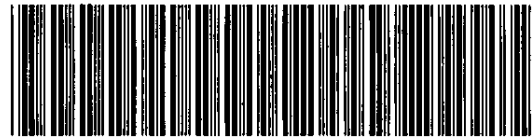
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000260094310

05/21/14--01003--002 \*\*35.00

FILED  
14 JUN 24 AM 10:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 24 2014  
C. CARROTHERS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 5, 2014

LARRY LAMORAY  
2111 STONEBRIDGE WAY  
CLERMONT, FL 34711

SUBJECT: LARRY LAMORAY, LLC  
Ref. Number: L13000122362

We have received your document for LARRY LAMORAY, 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 attached form must be completed in order to file the document.

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

Cathy A Carrothers  
Regulatory Specialist

Letter Number: 514A00012171

RECEIVED  
14 JUN 19 PM 12:03  
DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Larry Lamorny 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:

Larry Lamorny  
Name of Person

Larry Lamorny LLC  
Firm/Company

2111 Stonebridge Way  
Address

Dunmore FL 34711  
City/State and Zip Code

Larry@Lamorny.com  
E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Larry Lamorny at ( 407 ) 468-5932  
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 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: Lenny Lomora, LLC

2. (a) 2111 Stonebridge Way (b) Clearmont, FL 34711  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

3. 8/29/2013 4. 213000122362  
Date of filing/registration in Florida Document number

5. (a) Corporation Service Company  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1201 N. W. 51  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Tallahassee, FL 32301  
\_\_\_\_\_, FL

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

2111 Stonebridge Way  
NEW Registered Office Address:  
\_\_\_\_\_  
\_\_\_\_\_

Clearmont, FL 34711

FILED  
14 JUN 24 AM 10:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

\_\_\_\_\_  
Lenny Lomora  
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