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COVER LETTER

TO: Registration Section

Division of Corporations

_{SUBJECT:} PIPE in a PIPE Solutions, 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:

Kristi Marie Bowman

Name of Person

PIPE in a PIPE Solutions, LLC

Firm/Company

4025 Cattlemen RD, #195

Address

SARASOTA, FL 34233

City/State and Zip Code

PIPEINAPIPE@YAHOO.COM

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

For further information concerning this matter, please call:

KRISTI BOWMAN

...941

3741799

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

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. 2019 OCT -4 PM 12: 49 1! Name of the limited liability company: PIPE in a PIPE Solutions, LLC SECRETARY OF STATE 2. (a) Principal office address of limited liability company: 12215 RIVER RD TALLATASSEE, FEORIDA (Note: MUST BE STREET ADDRESS) MYAKKA CITY FL 34251 (b) Mailing address of limited liability company: 4025 CATTLEMEN RD (Note: MAY BE POST OFFICE BOX) #195 SARASOTA,FL 34233 SEPTEMBER 06, 2013 L13000125851 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: KRISTI M BOWMAN Registered Office Address: 1945 ROLLING GREEN CIRCLE SARASOTA,FL 34240 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW** Registered Agent: 4025 CATTLEMEN RD **NEW** Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) #195 SARASOTA FL 34233 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

KRISTI M BOWMAN

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 608, 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

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

INHS18 (05/08)