

L 13 000 133289

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

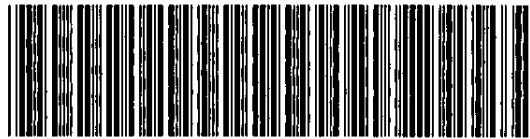
(Business Entity Name)

(Document Number)

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15 MAR 26 PM 5:02
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ALABAMA

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4-2-15
DC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 4, 2015

JAN H. WIGINTON
REDESIGN BY DESIGN LLC
266 RUBY LAKE LANE
WINTER HAVEN, FL 33884

SUBJECT: REDESIGN BY DESIGN LLC
Ref. Number: L13000133289

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

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) 245-6050.

Darlene Connell
Regulatory Specialist III

Letter Number: 915A00002239

RECEIVED
15 MAR 26 PM 2:07
LEGAL SERVICES
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: REDesign By Design
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:

JAN H Wiginton
Name of Person

REDesign By Design
Firm/Company

545 AVE K SE
Address

Winter Haven FL 33880
City/State and Zip Code

jh.wiginton@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jan Wiginton at (205) 412-1743
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: REDESIGN By Design LLC

2. (a) 545 AVE K SE

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Winter HAVEN FL
33880

(b) 266 Ruby Lake Lane

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

Winter Haven FL
33884

3. 09/02/2013
Date of filing/registration in Florida

4. 213000133289
Document number

5. (a) Christina Hansen/Accounting & Tax Edge LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

864 lot St North
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Winter HAVEN FL
33880

(b) Jan Wiginton
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

266 Ruby Lake Lane
NEW Registered Office Address:
Winter Haven
FL 33884

FILED
15 MAR 26 PM 5:02
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]
Signature of a member or authorized representative of a member

K. Brauman
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.

Jan Wiginton
Signature of Registered Agent