L1300041139

(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



200264902902

10/02/14--01013--005 **25.00

14 OCT -2 PM 2: 13
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

AND FILED



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Call The Guy 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:
Michael Franzone Name of Person
Call The Guy Firm/Company
1000 Via Santae Ln #103 Address
Celebration F 34747 City/State and Zip Code
Call The Guy Handaman a) Gmail-Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Franzone at (407) 558-7065 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

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

rioriad	i.
1. Na	me of the limited liability company: <u>Call The Guy</u>
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) COO Via Santac Ln#103 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Celebration Fi 34747 Celebration FL 3474
3. 5. (a)	Date of filing/registration in Florida Michael Franzone L13000141139 Document number
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 102 RUSH CT B Celebration F 34747 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	1000 Via Santae Jane # 103 NEW Registered Office Address: Cele bration
	,FL 34747
the char agent w was/we the art	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after nege or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the street of the operating agreement of the limited liability company. Many and the provided representative of a member of a member of a member of a member of signee or typed name of signee or a member of signee or typed name of signee or a member of signee or typed name or typed nam
I hereb provision the obli to mere notified	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the cons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept gations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect according to the registered office address, I hereby confirm that the limited liability company has been an writing of this change.

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