

L13000150138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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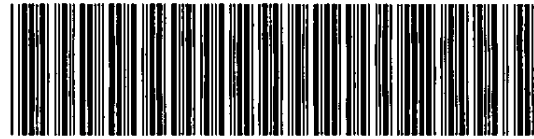
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Zeller Sells 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:

Norman Zeller

Name of Person

Zeller Sells LLC

Firm/Company

9149 Sweet Tree Trail

Address

Jacksonville, FL 32256

City/State and Zip Code

zellersells@hotmail.com

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

For further information concerning this matter, please call:

Norman Zeller

at (904)

524 9484

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: Zeller Sells LLC

2. (a) 9149 Sweet Tree Trail, Jacksonville, FL 32256 (b) _____

Principal office address of limited liability company:

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

Mailing address of limited liability company:

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

9149 Sweet Tree Trail, Jacksonville, FL 32256

3. 10/24/13
Date of filing/registration in Florida

4. L 13000150138
Document number

5. (a) W.F. Greenberg & CO LLC INCORP SERVICES INC.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

INCORP Services, Inc. W.F. Greenberg & CO LLC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

17888 67 COURT NORTH

LOXAHATCHEE LOXAHATCHEE FL 32470

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SECRETARY OF CORPORATION
14 APR 10 PM 8:32

(b) Norman Zeller

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

9149 Sweet Tree Trail, Jacksonville, FL 32256

NEW Registered Office Address:

9149 Sweet Tree Trail Jacksonville

Jacksonville FL 32256

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.

Norman Zeller
Signature of a member or authorized representative of a member

Norman Zeller

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.

Norman Zeller
Signature of Registered Agent

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