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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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February 9, 2016

ERIN GODFREY 17465 GULF BLVD REDINGTON SHORES, FL 33708

SUBJECT: GYPSY SOULS COFFEEHOUSE LLC

Ref. Number: L13000167082

We have received your document for GYPSY SOULS COFFEEHOUSE 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):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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) 245-6051.

Letter Number: 516A00002727

Justin M Shivers
Regulatory Specialist III
Registration/Qualification Section

www.sunbiz.org

## COVER LETTER

TO: Registration Section Division of Corporations								
SUBJECT: Gypsy Souls Coffee house 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:								
Erin Godfrey Name of Person								
Gypsy Souls Coffee house UC Firm/Company								
17465 Gulf Blud Address								
Redington Shoves, FL 33708 City/State and Zip Code								
E-mail address: (to be used for Juture Innual report notification)								
For further information concerning this matter, please call:								
Ein Godfrey at (177 ) 6 26- 8154  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 & Certified Copy								

INHS18 (2/14)

## 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. Nai	me of the limited liability company:	Sou	۱ς (	Coff	eehous	e LLC	
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Nailin		ed liability compar	
	Radination Shores . FL		2	o di	na ton	Shoves	. A.
	33708	<del></del>		1201	7	33.	708
	3 7 (0)	_				<u> </u>	
	5 Rb 2016		L13	3000	80701	<b>ユ</b>	
3.	Date of filing/registration in Florida	4.		Doc	ument number		
5. (a)	Bobbi Gillespie		<u>.</u>	<del></del>			
	Registered Agent and Registered Office shown on the records of the	he Florida I	Dept. of S	tate:			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRFSS)			200		
	Redington Shores, FL	<u>DDKLDB</u>			2016 FEB	William St.	
	Redirator Strones	.335	2 × D	<del></del>	B 22	,	
	, FL_	<u>، دی ،</u>	108		m	, <b>, , , ,</b>	
(b)	Erin Godfrey				OF STA		
, , ,	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:		RATE	Д О	
	17465 Gulf Blud				Þ	`	
	NEW Registered Office Address:						
	Redington Shores	***					
	J	2 T T	Q~				
	, FL_	337	08	<del></del>			
the char agent w was/we	mited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the legister.	the regist bility cor f the limi	ered off npany, i ted liabi	ice and t is here lity con	the business o eby confirmed npany or as oth	ffice of the reg that the change	gistered e(s)
	Laterell		Eriv		odtre	ofsignee	
I horah	ure of a member or authorized representative of a member by accept the appointment as registered agent and agre	ee to act i	in this co	rıııı anacitv	. I further agre	e to comply w	ith the
provision the obli	ons of all statutes relative to the proper and complete proper and complete programs of my position as registered agent as provided by reflect a change in the registered office address, I have a change in the registered office address, I have a change in the registered of the change.	performa I for in C ereby co	nce of m hapter 6 nfirm the	ly dutie 505, F.S at the li	s, and I am fan S. Or, if this do imited liability	iiliar with and cument is bein company has l	accept g filed been
Signatur	e of Registered Agent						
	Division of Corporations • P.O. B FILING FE			ıassee,	FL 32314		