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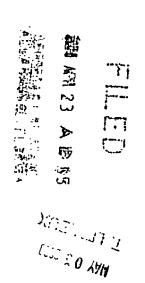
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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COVER LETTER

TO: Registration Section Division of Corporations				
Fred Wood Enterprises LLC SUBJECT:				
	Name of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.			
Please return all correspondence concerning this matt	er to the following:			
Melonie Wood				
Name of Person				
Fred Wood Enterprise, LLC				
Firm/Company				
2186 N. Hwy 81,				
Address				
Westville, FL 32464				
City/State and Zip Code				
eagle436@gmail.com				
E-mail address: (to be used for future annual rep	port notification)			
For further information concerning this matter, please	e call:			
Fred Wood at (850 658-2556			
Name of Person	Area Code & Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			
Enclosed is a check for the following amou ■ \$25 Filing Fee	Tallahassee, FL 32303 Int: □ \$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.

. Na	me of the limited liability company: Fred Wood Ente	rprise LLC	
	Fred Wood	(b) Fre	ed Wood Enterprise LLC
. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2186 N. Hwy 81	218	6 N. Hwy 81
	Westville, FL 32464	We	stville, FL 32464
	12/05/2013	L130	000168366
	Date of filing/registration in Florida	4.	Document number
. (a)	Melonie Wood		
. (11)	Registered Agent and Registered Office shown on the records of	f the Florida Dept	of State:
	3942 Doral Dr, Tampa, FL 33634		
	Registered Office Address (MUST BE FLORIDA STREET	(ADDRESS)	
			
	, F	L	
(L)			s.cor=t
(b)	Enter name of NEW Registered Agent and/or NEW Registered	ed Office address	
			2 2
	Melonie Wood		
	NEW Registered Office Address:		
	2186 N. Hwy 81		
	Westville, F	L	
hange gent v vas/we	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registered of iability compa- of the limited	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
Signa	ture of a member or authorized representative of a member	Wicionic	Printed or typed name of signee
l herei provisi he obl o mere	by accept the appointment as registered agent and agens of all statutes relative to the proper and completing igations of my position as registered agent as providely reflect a change in the registered office address, if in writing of this change.	gree to act in the e performance ed for in Chape Thereby confire	ais capacity. I further agree to comply with the