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TALLAHASSEE, FLORIDA

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T. LEMIEUX

· COVER LETTER

Division of Corporations
SUBJECT: L&D Self Defense Name of Corporation DOCUMENT NUMBER: L13 000174029
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Rence Hill Name of Contact Person ABDSELF Desense Firm/Company 3225: N histor RP # NS/05/2 Address Sunrise Fl 33345 City/State and Zip Code Hillheale 06 @Gmail 2000 E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: According to the content of the
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FL
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: BED SELF Defense
2. The principal office address: 3225 N hvorbus RO # 451052
Sunorse F1 33345
3. The mailing address (if different):
4. Date of incorporation/qualification: 11114 Document number: 1500174029
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Marsha Dasch (Legaline Corporate
services snc) Su Pridential
Drive 17th floor Sackson Wile, 81 32707
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
3225 Noticetus BD # USI052 P.O. Box NOT acceptable SUNCISE FI 3333US
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer or director Rence Hill Supervisor Printed or typed name and title
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent 146/2014 Fig. 7 Signature of Registered Agent
If signing on behalf of an entity:
renee (tu)
Typed or Printed Name

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

* * * FILING FEE: \$35.00 * * *