114000013885

		•
(R	Requestor's Name)	
(A	ddress)	
(A	ddress)	
(C	City/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Nam	e)
(0	Ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	o Filing Officer:	

Office Use Only



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AUG 2 0 2019 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations		•
SUBJECT: Preston's Air Conditioning And	Appliance	e LLC
	Limited L	iability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office O	Change and	I fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the	following:
Sidney Preston		
Name of Person	 -	
Preston's Air Conditioning And Appliance L	-LC	
Firm/Company		
4320 60th Ave NE		
Address		
Naples FI 34120		
City/State and Zip Code		
sidneyandjune@aol.com		
E-mail address: (to be used for future annual i	report notif	lication)
For further information concerning this matter, plea	ise call:	
Sidney Preston	239	234-5484
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 amo	ount:	
☑ \$25 Filing Fee	□ \$:	55 Filing Fee & Certified Copy
INHS18 (2/14)		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH F LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability computation the following statement in order to change its registered office or registered agent, or both, in the State Florida

(a) 43	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	(b) 4320	60th Ava NE Naplas El 24120	
_	· · · · · · · · · · · · · · · · · · ·		0th Ave NE Naples Fl. 34120	
		y: 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
3/	/17/2014	L14000	043885	
	Date of filing/registration in Florida	4.	Document number	
(a) Ju	une M Dunfee/preston			
	gistered Agent and Registered Office shown on the recor	rds of the Florida Dept. of S	State:	
4:	320 60th Ave NE			
Re	egistered Office Address (MUST BE FLORIDA STR	EET ADDRESS)		
N	laples	, FL 34120		
b) Sie	dney Preston		ANAS:	
	ter name of NEW Registered Agent and/or NEW Regis	stered Office address:		
4;	320 60th Ave NE		TILLETO ANSEE, FLORID	
NI	EW Registered Office Address:		A	
		24400		
	laples	_, _{FL} 34120		