L14000060565

(Re	equestor's Name)	·		
(Address)				
(Address)				
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DIVISION OF CORPORATIONS

14 JUL -7 AMII: 04

C. LEWIS

JUL 2 3 2019

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	ν.			
Rogue Lifestyles				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Offi	ice Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	is matter to the following:			
Steven Allen				
Name of Person				
Rogue Lifestyles				
Firm/Company				
1499 Gulf to Bay Blvd				
Address				
Clearwater, FL 33755				
City/State and Zip Code				
steve@rogue-pilot.com				
E-mail address: (to be used for future ann	ual report notification)			
For further information concerning this matter,	please call:			
Steven Allen	at ()			
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			
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.

2. (a		1	400 C Itt D D D		
- . (u		(h) :	(b) 1499 Gulf to Bay Blvd.		
	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)		
	Clearwater, FL 33755		Clearwater, FL 33755		
	April 14, 2014	<u>L1</u>	4000060565		
3.	Date of filing/registration in Florida	4.	Document number		
5. (8	Steven S Allen				
(-	Registered Agent and Registered Office shown on the records of 1599 Gulf to Bay Blvd.	f the Florida De	pt. of State:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)			
			<u> </u>		
	Clearwater , FI	33755	SECRETARY VISION OF CO		
(b	Steven S Allen		Or CC		
•	Enter name of NEW Registered Agent and/or NEW Registered	d Office addres	<u>x</u>		
	1499 Gulf to Bay Blvd.		AM 11: Ou		
	NEW Registered Office Address:				
	Clearwater	33755	·········		
		L_00/00			
the clagent was/v	limited liability company is not organized under the la lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I were authorized by an affirmative vote of the members ticles of organization of the operating agreement of the	f the register iability comp of the limited liab	ed office and the business office of the registered bany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in ility company.		
C:	2/40/4	Steve	n S Allen		
_	ature of a member or authorized representative of a member		Printed or typed name of signee		
provi the o to me	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, led in writing of this change.	ree to act in e performanc ed for in Cha hereby confi	this capacity. I further agree to comply with the re of my duties, and I am familiar with and accept opter 605, F.S. Or, if this document is being filed irm that the limited liability company has been		
Signa	ure of Registered Agent				