## 44000113515

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

Office Use Only



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S. YOUNG

SECRETARY OF STATE ALLAHASSEE, FLORIDA

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## **COVER LETTER**

TO: Registration Section Division of Corporations							
Freeway Photo LLC SUBJECT:							
	ame of Limited	Liability Company		·			
Dear Sir or Madam:							
The enclosed Registered Agent/Registered O	office Change a	nd fee(s) are submitted for filin	ìg.				
Please return all correspondence concerning	this matter to t	he following:					
Jason Ludwig							
Name of Person							
Freeway Photo LLC			•	<u>.</u>			
Firm/Company	-			ALC:			
P.O. Box 172666				JUN -			
Address			•	18 AN			
Tampa, FL 33672			į	AN 8: 13 AN 8: 13 AN B: 13			
City/State and Zip Code		<del></del>		DA TO			
jasonludwig@gamil.com							
E-mail address: (to be used for future a	nnual report no	ntification)					
For further information concerning this matter	er, please call:						
Jason Ludwig	813	3628002					
Name of Person	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Area Code & Daytime Tel	lephone N	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	nclosed is a check for the following amount:						
<b>☑</b> \$25 Filing Fee		\$55 Filing Fee & Certified Co	рру				

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. Na	ame of the limited liability company: Freeway Photo	LLC	
2. (a)	1213 N Franklin Street, Tampa FL 33602	(b) P.O. Box 172666 Tampa, FL 33672	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	-	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	07/18/2014		L14000113515
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
	Registered Agent and Registered Office shown on the records of the 13302 WINDING OAK COURT A	e Florida	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET AL	ODRESS	A A A
	Tampa .FL3	3612	TILE SSE
(b)	Jason Ludwig		E S S S S S S S S S S S S S S S S S S S
(0)	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	dress:
	1213 N Franklin Street		
	NEW Registered Office Address:		
	Tampa FL3	3602	<u></u>
the cha agent v was/we	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liabore authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liaboration.	he regis bility co the lim mited l	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in
Signal	tyry of a member or authorized representative of a member	<u></u>	Printed or typed name of signee
I herei provisi the obl to merc notifica	by accept the appointment as registered agent and agreeing of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. I he writing of this change.	e to act erform for in C ereby co	in this capacity. I further agree to comply with the
Signard	re of Registered Agent		