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COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: Tenvor Enterprises, LLC							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Stephanie Bacon							
Name of Person							
Tenvor Enterprises, LLC							
Firm/Company							
6167 Anchor Lane							
Address							
Rockledge, FL 32955							
City/State and Zip Code							
billbacon1@gmail.com							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Stephanie Bacon <u>at (321) 674-7198</u>							
Name of Person Area Code & Daytime Telephone N	lumber						
STREET/COURIER ADDRESS: Registration Section Registration Section							
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327							
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314							
Tallahassee, Florida 32301							
Enclosed is a check for the following amount:							
■ \$25 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.

1.	Na	ame of the limited liability company: Tenvor Enterp	orises,	LLC	
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (t	D)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		6167 Anchor Lane		6167 An	chor Lane
		Rockledge, FL 32955	<u> </u>	Rockled	ge, FL 32955
		07/23/14		L1400011	15803
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	United States Corporation Agents, Inc			
٥,	(4)	Registered Agent and Registered Office shown on the records of t	the Florid	a Dept. of State	#:
		13302 Winding Oak Ct			
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRES:	<u>5)</u>	•
		Tampa , FL	33612		≥co
		, rL	·		- 5 5-2-5
	(b)	Stephanie Bacon			JUL 30 AHASSE
	` '	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			
	NEW Registered Office Address:				AH II: 04 OF STATE E. FLORIDA
		6167 Anchor Lane			<u> </u>
		o to 7 monor cano			
		Rockledge, FL	32955)	_
Ι£	tha i	limited liability company is not organized under the lav			oride it is hereby confirmed that after
the	e cha	ange or changes are made, the Florida street address of	the regi	istered office	e and the business office of the registered
ag wa	ent i	will be identical. Or, in the case of a Florida limited lie ere authorized by an affirmative vote of the members of	ability c of the lin	ompany, it is nited liabilit	s hereby confirmed that the change(s) y company or as otherwise provided in
the	e art	icles of organization or the operating agreement of the	limited	liability con	npany.
		uphani Bala	Ste	ephanie Ba	
		ature of a member or authorized representative of a member			Printed or typed name of signee
pr the to	ovis e ob mer	eby accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I did in writing of this change.	ree to ac perforn d for in hereby c	it in this cap nance of my Chapter 605 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been
<u> </u>	QV	ure of Registered Agent			