14000119292

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
<u> </u>					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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SECRETARY OF STATE

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COVER LETTER

TO:

Registration Section

Divisio	on of Corporations					
SUBJECT:	JECT: 4708 LB MCLEOD RD, LLC Name of Limited Liability Company					
SOBSECT.						
Dear Sir or Ma	adam:					
The enclosed F	Registered Agent/Registered Office Ch	ange and f	fee(s) are submitted for filing.			
Please return a	Il correspondence concerning this mat	ter to the f	ollowing:			
Mary V	/. Palumbo					
	Name of Person		_			
Law O	ffices of Mary V. Palumbo & As	ssociates	s, PA			
	Firm/Company					
6150 E	Diamond Centre Ct #1102					
	Address					
Fort M	yers, FL 33912					
	City/State and Zip Code					
~	powerboltandtool.com					
E-mail ac	ddress: (to be used for future annual re	port notific	cation)			
For further info	ormation concerning this matter, pleas	e call:				
Mary_\	/ Palumbo at Name of Person	239				
Regist Divisi P.O. E	ng Address: tration Section ion of Corporations Box 6327 nassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclos	sed is a check for the following amo	unt:				
XX X \$25	Filing Fee	□ \$5	5 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	me of the limited liability company:	MCL ———	EOD R	OAD, LLC
2. ((a)	12940 Kedleston Circle		(b)	12940 Kedleston Circle
	(-) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Fort Myers, FL 33912		_	Fort Myers, FL 33912
		7/29/2014		_ 	L14000119292
3.		Date of filing/registration in Florida		4.	Document number
5.	(a)	Mary V. Palumbo			
		Registered Agent and Registered Office shown on the records	ls of the	Florida Dep	ot, of State:
		7370 College Parkway #314			set
		Registered Office Address (MUST BE FLORIDA STRE	ET ADI	<u>DRESS)</u>	
		Fort Myers	, FL	33907	SECRETARY SEE STATE SECRETARY SECRET
((b)	Mary V. Palumbo	·		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ered Of	fice addres	<u>s:</u>
		6150 Diamond Centre Ct., #1102			
		NEW Registered Office Address:			
					
		Fort Myers	, FL	33912	
cha age was the	inge ent v s/we arti ignat	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited by an affirmative vote of the member cles of organization or the operating agreement of the member of a member of all statutes relative to the proper and complications of my position as registered agent as provely reflect a change in the registered office address	the read liabilers of the lin	gistered o lity compa he limited nited liabi Lar	ffice and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in lity company. The F. Garrett Printed or typed name of signee This canacity. I further agree to comply with the
not	ijied	in writing of this change. The of Registered Agent		/ J ung	