L14000126027

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

Office Use Only



000278586790

11/16/15--01018--021 **25.00

2015 NOV 16 PM 4: 10

W. Gumpan NOV ± 7 2015

COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Divi	sion of Corporations				
CHID HECT.	Bushel and a Peck, LLC Name of Limited Liability Company				
SUBJECT:					
Dear Sir or N	Madam:				
The enclosed	d Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to the	following:		
Anne Boa	rdman				
	Name of Person				
	Firm/Company		_		
137 Orens	<u> </u>				
	Address				
Oviedo, F	L 32765				
	City/State and Zip Code				
	dman@yahoo.com				
E-mail	address: (to be used for future and	nual report noti	fication)		
For further i	nformation concerning this matter.	, please call:			
Anne Boa	rdman	407 at (739-0577		
	Name of Person		Area Code & Daytime Telephone Number		
	-		AILING ADDRESS:		
	-		egistration Section		
	sion of Corporations		Division of Corporations P.O. Box 6327		
	- · · · · · · · · · · · · · · · · · · ·				
	ahassee, Florida 32301	1 2	illahassee, Florida 32314		
Enc	losed is a check for the following	g amount:			
× (\$	25 Filing Fee	□ \$	55 Filing Fee & Certified Copy		

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.

l. Na	me of the limited liability company:	D A PECK,	, LLC
2. (a)	137 Orense Way	(b)	Same
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1522 Nature Court		
	Winter Springs, FL 32708	_	
	August 12, 2014	L14	4000126027
3 .	Date of filing/registration in Florida	4.	Document number
6. (a)	Anne Boardman		
. (u)	Registered Agent and Registered Office shown on the records of	the Florida Dep	ot. of State:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
	1522 Nature Court		
	Winter Springs . FL	32708	295 150
	,		
(b)			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address	<u> </u>
	NEW Registered Office Address:		
	137 Orense Way		·
	Oviedo, FL	32765	
he cha igent v vas/we he arti	imited liability company is not organized under the lavinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited library authorized by an affirmative vote of the members of class of organization or the operating agreement of the ture of a member or authorized representative of a member	the registere ability compa of the limited	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in
I herei provisi he obl o mere	by accept the appointment as registered agent and aground ons of all statutes relative to the proper and complete ignions of my position as registered agent as provide ely reflect a change in the registered office address, I is in writing of this change.	ree to act in t performance d for in Chap hereby confli	this capacity. I further garee to comply with the

Signature of Registered Agent