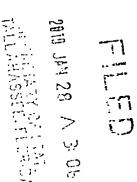
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(Re	equestor's Name)	
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January 17, 2019

KIMBERLY JEAN THOMPSON 906 W EUCLID AVE DELAND, FL 32720

SUBJECT: COMPETITIVE EDGE GOODS, LLC

Ref. Number: L14000137486

We have received your document for COMPETITIVE EDGE GOODS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please print or type name of signee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 019A00001409

Dionne M Scott Regulatory Specialist II

COVER LETTER

ro:	Registration Section
	Division of Cornerati

Division of Corporations

SUBJECT: COMPETITIVE EDGE GOODS, 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:

KIMBERLY JEAN THOMPSON
Name of Person

COMPETITIVE EDGE GOODS, LLC
Firm/Company

906 WEST EUCLID AVENUE
Address

City/State and Zin Code

Competitive edge good s agmail. com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KIMBERLY THOMPSON at (407) 929, 4250

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.

1 torten	
I. Na	me of the limited liability company: COMPETITIVE EDGE GOODS, LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
	DELAND, FL 32720 DELAND, FL 32720
2	09.03.2014 L14000137486
3.	Date of filing/registration in Florida 4. Document number
5. (a)	UNITED STATES CORPORATION AGENTS INC Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	13302 WINDING OAK COURT A
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	TAMPA FL 33612 KIMBERLY JEAN THOMPSON Enter name of NEW Registered Agent and/or NEW Registered Office address:
(b)	KIMBERLY JEAN THOMPSON
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	906 WEST EUCLID AVENUE
	NEW Registered Office Address:
	<u>DELAND</u> .FL 32720
If the li	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the chai	nge or changes are made, the Florida street address of the registered office and the business office of the registered
was/we	ill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) re authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
	cles of organization or the operating agreement of the limited liability company.
Signati	Ure of penember or authorized representative of a member Main Main
I hereb provision the obling to mere notified	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the constant of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept gations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been in the change.
Ken	e of Registrated Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00