

L14000 175676

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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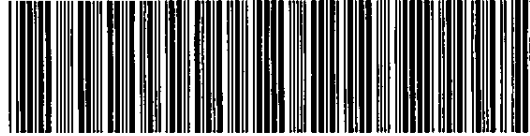
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 04 2015
J SHIVERS

207



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 6, 2015

ROMAN BORVANOV
1605 SW 143RD AVE
PEMBROKE PINES, FL 33027

SUBJECT: BORVANOV TENNIS, LLC
Ref. Number: L14000175676

We have received your document for BORVANOV TENNIS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 015A00013998

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Borvanov Tennis, LLC
Name of Corporation

DOCUMENT NUMBER: L14000175676

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Roman Borvanov

Name of Contact Person

Borvanov Tennis, LLC

Firm/Company

1065 SW 143rd Ave

Address

Pembroke Pines, FL 33027

City/State and Zip Code

borvanov@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roman Borvanov

Name of Contact Person

at (360) 909-7710

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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. Name of the limited liability company: Borvanov Tennis LLC
2. (a) 1065 SW 143rd Ave
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Pembroke Pines FL 33027
USA
- (b) 1065 SW 143rd Ave
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Pembroke Pines FL 33027
USA
3. November 12, 2014
Date of filing/registration in Florida
4. L14000175676
Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Corporation Service Company

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1201 Hays Street

Tallahassee, FL 32301

- (b) _____
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

REGISTERED AGENTS INC.

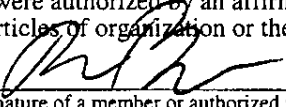
NEW Registered Office Address:

3030 N. Rocky Point Drive, STE 150A

Tampa, FL 33607

15 AUG - 3 AM 8:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


Signature of a member or authorized representative of a member

Roman Borvanov

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


Signature of Registered Agent

Bill Havre/Assistant Secretary