## 114000186215

(Re	questor's Name)	<u> </u>
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e #)
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(Dc	ocument Number)	
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## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: <u>Carls Tree Service</u> Name of Lin	nited Liability Company
Dear Sir or Madam:	
	and the form of the state of the filling
The enclosed Registered Agent/Registered Office Chan	age and ree(s) are submitted for firing.
Please return all correspondence concerning this matter	to the following:
•	
Eric Sadler Name of Person	
Name of Person	
Carl's Tree Service, LL Firm/Company	<u>.C</u>
1147 Gleonway Dr Address	U :
Perry FL 32347 City/State and Zip Code	& W
Carlsadler 39@ Yahbe, Com E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please c	eall:
William Carlton Sadler at (	850 <sub>)</sub> 843-5575
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	t:
□ \$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. Na	me of the limited liability company: Carl's Tree Service, LLC
2.	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  (Note: MAY BE POST OFFICE BOX)
	3639. Wouds theek Rd
	Perry, FC 32347
3.	Date of filing/registration in Florida  L14000 186015  Document number
	Sadler William C  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  Carl's Tree Service LLC  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  3639 Woods Creek Rd.  FL 3234)  Enter name of New Registered Agent and/or New Registered Office address:  147 Glenway Dr  New Registered Office Address:
the cha agent w was/we the artic Signat I hereh provision the obli- to mere notifica	mited liability company is not organized under the laws of the State of Florida. it is hereby confirmed that after the or changes are made, the Florida street address of the registered office and the business office of the registered ill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in class of organization or the operating agreement of the limited liability company.  The first of a member or athorized representative of a member of a mem