

U4A00187081

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(Address)

(Address)

(City/State/Zip/Phone #)

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S. YOUNG

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Tactical Preventative Maintenance, 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:

Preston Purvis

Name of Person

Tactical Preventative Maintenance, LLC

Firm/Company

PO Box 711

Address

Polk City, FL 33868

City/State and Zip Code

shank.purvis@yahoo.com

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

For further information concerning this matter, please call:

Preston Purvis at ( 863 ) 370-2772  
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

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**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: Tactical Preventative Maintenance, LLC

2. (a) 5970 Stagecoach Road (b) P.O. Box 711

Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)

Polk City, FL 33868

Polk City, FL 33868-0711

12/08/2014

L14000187081

3. Date of filing/registration in Florida

4. Document number

5. (a) Monica Purvis

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5970 Stagecoach Road

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

Polk City, FL 33868

(b) Preston Shank Purvis

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

5970 Stagecoach Road

**NEW** Registered Office Address:

Polk City, FL 33868

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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.

Preston Purvis  
Signature of a member or authorized representative of a member

Preston Shank Purvis  
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.*

Preston Purvis  
Signature of Registered Agent