115000036119

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

Office Use Only



100272144501

05/08/15--01031--017 **25.00

15 MAY -8 PM 2: 58

SECRETARY OF STATE

OC 5/14

COVER LETTER

⋆ TO: " Registration Section

Division of Corporations						
Pon Family @ Port Lonkou, LLC SUBJECT:	Pon Family @ Port Lonkou, LLC					
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this ma	atter to the following:					
Thomas Young						
Name of Person	<u> </u>					
Indv.						
Firm/Company						
20118 Buttermere Ct.						
Address						
Estero, Florida 33928						
City/State and Zip Code						
atjjt20118@gmail.com						
E-mail address: (to be used for future annual r	report notification)					
For further information concerning this matter, plea	ase call:					
Thomas Young	239 947-4071					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS:	MAILING ADDRESS:					
Registration Section	Registration Section					
Division of Corporations	Division of Corporations					
Clifton Building	P.O. Box 6327					
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314					
Enclosed is a check for the following am	ount:					
■ \$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. N	lame of the limited liability company: Pon Family (2) Port	Lonkou, LLC			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 20118 Buttermere Ct.	((b)			
	Estero, Florida 33928		Estero , FL 33			
	Feb 26 , 2015	_	L15000036119)		
3. 5. (a		4.		ment number		
	Registered Agent and Registered Office shown on the records of Registered Office Address 1201 Hays Street	ADDRES	<u>(S)</u>		15 MAY -8 PM 2: 58	SEC
(b)	Thomas Young	3230°		-		FILED RETARY OF STATE AHASSEE FLORID
	NEW Registered Office Address: 20118 Butteremere Ct.					
	Estero , FI	33928	3			
the chagent was/v	limited liability company is not organized under the lanange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	f the reginability of the li	istered office and the company, it is herebant to the company it is herebanted liability company.	he business office by confirmed that pany or as otherward	ce of that the cl	e registered hange(s)
		Th	omas Young	d as timed name of	ianaa	
I her provi. the oil to me notifi	ature of a member of authorized representative of a member eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.	ree to a e perfori ed for in hereby	et in this canacity	d or typed name of s I further agree t and I am Jamili Or, if this docu nited liability con	to com	oly with the and accept being filed has been

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