

LIS 0000 45897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

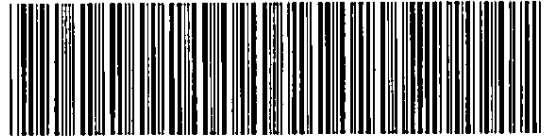
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
2023 APR 12 AM 10:58  
TALLAHASSEE, FL

## COVER LETTER

**TO:** , Registration Section  
Division of Corporations

**SUBJECT:** Stillwater Trading Company, 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:

Ted W. Weeks IV, Esq.

Name of Person

Ted W. Weeks IV, P.A.

Firm/Company

402 S. Kentucky Ave., Suite 350

Address

Lakeland, FL 33801

City/State and Zip Code

stillwatertradingcompany@gmail.com

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

For further information concerning this matter, please call:

Ted W. Weeks IV

863

802-5000

at (

Name of Person

Area Code &amp; Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**Enclosed is a check for the following amount:**

 \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

SECRET  
2073 APR 12 AM 10:58  
TALLMAN

*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.*

INHS18 (2/14)