150000 69291

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(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
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(Business Entity Name)					
(Document Number)					
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2020 III | PH 4: 20

R. WHITE

COVER LETTER

TO: Registration Sec Division of Corp					
Andrae Bry SUBJECT:	ant Bail Bonds LLC				
	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered	Agent/Registered Office Cha	ange and fee(s) are submitted for filing.			
Please return all corresp	ondence concerning this matte	er to the following:			
Andrae Bryant					
	Name of Person				
Andrae Bryant Bail Bonds	LLC				
	Firm/Company				
3141 NW 13TH ST STE E	3				
	Address				
Gainesville, FL. 32609					
City	//State and Zip Code				
andraebryant3333@gmail.	com				
E-mail address: (to	be used for future annual repo	ort notification)			
For further information	concerning this matter, please	call;			
Andrae Bryant	at (377-3333			
Name o	f Person	Area Code & Daytime Telephone Number			
Mailing Addre Registration Se Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclosed is a cl	neck for the following amoun	nt:			
\$25 Filing Fe	e	□ \$55 Filing Fee & Certified Copy			

INHS18 (2/14)



April 13, 2020

ANDRAE BRYANT 3141 NW 13TH ST STE B GAINESVILLE, FL 32609

SUBJECT: ANDRAE BRYANT BAIL BONDS L.L.C.

Ref. Number: L15000069297

We have received your document for ANDRAE BRYANT BAIL BONDS L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return 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) 245-6050.

Rebekah White
Regulatory Specialist II Supervisor

Letter Number: 020A00007813

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	ime of the limited liability company: Andrae Bryant Bail	Bonds I	.LC		
2. (a)	3141 NW 13TH ST STE 10 Gaingeville EL 32600		(b) 3141 NW 13TH ST STE 10 Gainesville FL, 32609		
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	. (0		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	3141 NW 13th Street StE B	_	3141	NW 13th Street StE B	
	Creinesulle F1 32609	-	bain	esville Fl 32609	
	04/07/2015	I	_15000069	9297	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Andrae Bryant				
- (,	Registered Agent and Registered Office shown on the records of the	: Florida	Dept. of Sta	ete:	
	Registered Office Address (MUST BE FLORIDA STREET AD	DRESS		- 20	
	3131 NW 13TH ST STE 10 1				
	Gainesville 51	2609			
(b)	Olympia Bryant 3141 NW Enter name of NEW Registered O			- Ste B	
	Andrae Bryant Bail Bonds LLC			7.333	
	NEW Registered Office Address:			- 137	
	3141 NW 13TH STE STE 10 3141 NW 13th	<u>St</u>	reet	Ste B I R I B	
	Gainesville FL 32	2609			
change agent was/we the ami Signat I herei provisi the oblito mere	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of the cless of organization or the operating agreement of the linguistic of a member or authorized representative of a member ov accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete period of the provided for the registered agent as provided for the reflect a change in the registered office address, I her thin writing of this change.	egistered ility cor the limi mited limi Andra to act i	I office are npany, it is ted hability corac Bryant	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. Printed or typed name of signee Printed or typed name of signee	
<u>. In</u>	tral Byan				