

L15000082011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

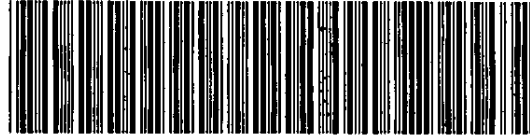
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600285105396

600285105396
05/02/16--01045--017 **25.00

FILED
16 MAY -2 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 05 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Space Coast Pressure Pros 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:

Sampson Joel Pomerleau
Name of Person

Space Coast Pressure Pros LLC
Firm/Company

3151 Waterside Cir
Address

Titusville FL 32780
City/State and Zip Code

sam@spacecoastpressurepros.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leslie Babecki at (407) 967-1677
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

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: Space Coast Pressure Pros LLC

2. (a) 351 Waterside Cir (b) 351 Waterside Cir

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

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

Titusville FL 32780

Titusville FL 32780

May 8th 2015

L15000082011

3. Date of filing/registration in Florida 4. Document number

5. (a) Sampson Joel Pomerleau
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

351 Waterside Cir Titusville FL 32780

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

351 Waterside Cir

Titusville, FL 32780

(b) Raymond O Burger
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:

, FL

FILED
16 MAY -2 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

[Signature]
Signature of a member or authorized representative of a member

Sampson Joel Pomerleau
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.

[Signature]
Signature of Registered Agent