

# L15000086516

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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K. SALY  
EXAMINER  
JUL 13 2015



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15 JUL 13 PM 2:33

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

June 19, 2015

VANDERHORST & WEISZ ASSOCIATES LLC  
BRIAN A HILLS  
1490 SUNSHADOW DR, STE. 3030  
CASSELBERRY, FL 32707

SUBJECT: VANDERHORST & WEISZ ASSOCIATES LLC  
Ref. Number: L15000086516

We have received your document for VANDERHORST & WEISZ ASSOCIATES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 815A00012904

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Vanderhorst & Weisz Associates 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:

Anthony Hills

Name of Person

Vanderhorst & Weisz Associates. LLC

Firm/Company

1490 Sunshadow Dr. Suite 3030

Address

Casselberry, Fl. 32707

City/State and Zip Code

vanderhorst.weisz@mail.com

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

For further information concerning this matter, please call:

Brian Hills

Name of Person

at ( 800 ) 225-6923

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: Vanderhorst & Weisz Associates LLC

2. (a) 1490 Sunshadow Dr  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)

Suite 3030  
Casselberry, FL 32707

(b) P.O. Box 180531  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)

Casselberry, FL 32718

3. 05/14/2015  
Date of filing/registration in Florida

4. L15000086516  
Document number

5. (a) Brian Hills / Vanderhorst & Weisz Associates LLC  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1490 Sunshadow Dr  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Suite 3030  
Casselberry, FL 32707

(b) Anthony Hills  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

1490 Sunshadow Dr.  
NEW Registered Office Address:  
Suite 3030  
Casselberry, FL 32707

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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.

Brian Hills  
Signature of a member or authorized representative of a member

Brian Hills  
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