115000099673

(Requestor's Name)				
(Address)				
(Address)				
(Ci	ty/State/Zip/Phone	#)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE TALL AREASSEE, FLORES

JUN 2 2 2015

Y SULKER

COVER LETTER

TO: Registration Section Division of Corporations	:		
SUBJECT: Thompson Acco			
	Nam	e of Limited I	Liability Company
Dear Sir or Madam:			
The enclosed Registered Agent/I	Registered Offi	ce Change and	d fee(s) are submitted for filing.
Please return all correspondence	concerning thi	s matter to the	e following:
Curtis Thompson			
Name o	Person		
Thompson Accounting LLC			
Firm/Co	mpany		
8801 Biscayne Blvd, #104			
Addre	SS		
Miami Shores, FL 33138			
City/State a	nd Zip Code		
cthompson@thompsonacc	.com		
E-mail address: (to be used	for future ann	ual report not	ification)
For further information concerni	ng this matter,	please call:	
Curtis Thompson		305	898-7579
Name of Person		(Area Code & Daytime Telephone Number
STREET/COURIER A	DDRESS:	N	AAILING ADDRESS:
Registration Section		R	egistration Section
Division of Corporations	}		Division of Corporations
Clifton Building		P	.O. Box 6327
2661 Executive Center (Т	allahassee, Florida 32314
Tallahassee, Florida 323	01		
Enclosed is a check for	the following	amount:	
■ \$25 Filing Fee			\$55 Filing Fee & Certified Copy

TO:

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	ame of the limited liability company: Thompson A	ccounting LLC			
2. (a)	8801 Biscayne Blvd	(b) 8801 B	(b) 8801 Biscayne Blvd		
2. (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)		
	Suite 104	Suite 10	04		
	Miami Shores, FL 33138	Miami S	Shores, FL 33138		
	06/08/14	L150000	99673		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	United States Corporation Agents, Inc				
J. (a)	Registered Agent and Registered Office shown on the records of 13302 Winding Oak Court	the Florida Dept. of Sta	te:		
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS)	_		
	Tampa , FI	33612	7.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5		
(b)	Curtis Thompson				
()	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:			
	Thompson Accounting LLC		- PH 12 - 19		
	NEW Registered Office Address:		The second secon		
	8801 Biscayne Blvd, #104				
	Miami Shores	_L 33138			
the cha agent was/withe arti- the arti- Signa I here provisi the obi- to mer-	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the light of a member or authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and complete light of the proper	f the registered officiability company, it of the limited liability conditions and the limited liability conditions.	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. Thompson Printed or typed/name of signee pacity. I further agree to comply with the		