L19000126868

| (Requestor's Name) |
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| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| Division of Corporations | , |
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| A to Z Construction Pro. L.L.C. SUBJECT: | |
| | d Liability Company |
| Dear Sir or Madam: | |
| The enclosed Registered Agent/Registered Office Change a | and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the | he following: |
| Gjergj Shkurtaj | |
| Name of Person | |
| A to Z Construction Pro, L.L.C | |
| Firm/Company | |
| 1853 Royal Fern Lane | |
| Address | |
| Jacksonville, FL 32250 | |
| City/State and Zip Code | |
| Georgeatozconstruction@gmail.com | |
| E-mail address: (to be used for future annual report no | otification) |
| For further information concerning this matter, please call: | |
| Gjergj Shkurtaj 904 | 314-9191 |
| Name of Person | Area Code & 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 |

INHS18 (2/14)

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.

| 1853 Royal Fern Lane, Jacksonville FL 32250 | (b) _ | 853 Royal Fern Lane, Jacksonville FL 32250 |
|---|---|---|
| Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX) |
| | | |
| July 24, 2015 | L15 | 5000126868 |
| Date of filing/registration in Florida Gjergj Shkurtaj | 4. | Document number |
| Registered Agent and Registered Office shown on the records of 12006 Michaelson Ct. Jacksonville FL 32223 | the Florida De | pt. of State; |
| Registered Office Address (MUST BE FLORIDA STREET) 1853 Royal Fern Lane | ADDRESS) | |
| Jacksonville | 32250 | |
| Enter name of NEW Registered Agent and/or NEW Registered 1853 Royal Feyn Land NEW Registered Office Address: Jack Sannle, G. 32250. | | 11 CD 11 ARY CF STATE |
| , FI | <u> </u> | |
| Emited liability company is not organized under the last of changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of the of organization or the operating agreement of the | registered of ability comp of the limited | office and the business office of the registere any, it is hereby confirmed that the change (d liability company or as otherwise provided lity company. |
| urd and inches or authorized representative of a member | - | Printed or typed name of signee |
| by a cepathe appointment as registered agent and agricols of all statutes relative to the proper and complete | nertormanc. | this capacity. I further agree to comply with e of my duties, and I am familiar with and a pter 605, F.S. Or, if this document is being |

Signature of Registered Agent