

L15000 132524

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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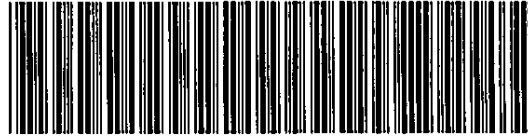
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
16 JUN 23 PM 12:09

JUN 24 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: P CHAMPAGNE 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:

DUCAUROY, PEGGY

Name of Person

P CHAMPAGNE LLC

Firm/Company

30725 US HWY 19 N, 205

Address

PALM HARBOR, FL 34684

City/State and Zip Code

PEGWAFFLES@GMAIL.COM

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

For further information concerning this matter, please call:

PEGGY DUCAUROY

Name of Person

at (813)

405-5963

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

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**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: P CHAMPAGNE, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

975 ARTHUR GODFREY ROAD, SUITE 104

975 ARTHUR GODFREY ROAD, SUITE 104

MIAMI BEACH, FL 33140

MIAMI BEACH, FL 33140

08/03/2015

L15000132524

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

5. (a) 2B CONSULTING LLC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

975 ARTHUR GODFREY ROAD, SUITE 104

MIAMI BEACH, _____, FL 33140

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

PEGGY DUCAUROY

NEW Registered Office Address:

27001 US HWY 19 N , SUITE 1050

CLEARWATER _____, FL 33761

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 of a member or authorized representative of a member

PEGGY DUCAUROY

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 of Registered Agent

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TALLAHASSEE, FLORIDA
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