L15000145682

(Requestor's Name)					
(Address)					
(Address)					
(City	//State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bus	siness Entity Nar	ne)			
(LOC	cument Number)				
Certified Copies	Certificates	of Status			
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S Warren

AUG 22 2015

COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations						
SUBJI	Bay Personal Defense LLC						
	Nan	ne of Limited Lia	bility Company				
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Off	ice Change and for	ee(s) are submitted for filing.				
Please	return all correspondence concerning th	is matter to the fo	ollowing:				
Steve	en Lewis						
	Name of Person		<u> </u>				
Bay F	Personal Defense LLC						
	Firm/Company		-				
2714	Pembroke Drive		_				
	Address						
Pana	ma City FL 32405		·				
	City/State and Zip Code		_				
	ersonaldefense@gmail.com						
E	E-mail address: (to be used for future and	nual report notific	ation)				
For fu	rther information concerning this matter	, please call:					
Steve	en Lewis	at (691-5603				
	Name of Person		Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS:	MA	ILING ADDRESS:				
	Registration Section		stration Section				
	Division of Corporations		Division of Corporations				
	Clifton Building		P.O. Box 6327				
	2661 Executive Center Circle Tallahassee, Florida 32301	Falls	ahassee, 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. N	ame of the limited liability company: Bay Persona	al Defer	se LLC		
2. (a)	2714 Pembroke Drive	((b) 2714 Pembroke Drive		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Panama City FL 32405		Panama	a City FL 32405	
	August 25th 2015	_	L150001	45682	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	Steven Lewis				
(-	Registered Agent and Registered Office shown on the records of	f the Florid	la Dept. of Stat	e:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>s)</u>		
	4060 Woodridge Road				
	Panama City , Fi	L_32405	5		
(b)	Steven Lewis			TARY OF TO	
(*)	Enter name of NEW Registered Agent and/or NEW Registered	d Office ad	<u>ldress</u> :	P 5: LI	
	NEW Registered Office Address:			- · · · · · · · · · · · · · · · · · · ·	
	2714 Pembroke Drive			_	
	Panama City , FI	L_32405	5	_	
the ch agent was/w	limited liability company is not organized under the la lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li- vere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	f the region in the line of the line limited	istered offic ompany, it i nited liabilit	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.	
Sign	ature of a member or authorized representative of a member	-		Printed or typed name of signee	
provis the ob to men	eby accept the appointment as registered agent and age sions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.	ree to ac e perforn ed for in hereby c	et in this cap nance of my Chapter 60. confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	
Signat	ure of Registered Agent				