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COVER LETTER

TO: Registration Section **Division of Corporations** Crossfire Magneto Service LLC SUBJECT: _ 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: Paul A. Brevard Name of Person Crossfire Magneto Service LLC Firm/Company 1 Beech Blvd Address Port Orange, FL 32128 City/State and Zip Code isbrevard@msn.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 970 672-6505 Paul A. Brevard Area Code & Daytime Telephone Number Name of Person MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: □ \$55 Filing Fee & Certified Copy **☑** \$25 Filing Fee 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.

I. Na	ma of the limited lightlity company:	e Magneto Ser	vice LLC 		
2. (a)		(b)			
(,	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	.ny:	(b)		
	1 Beech Blvd., Port Orange, FL 32128	1			
	08-26-2015	L-	15000146426		
3.	Date of filing/registration in Florida	4.	Document nur	nber	
5. (a)	Registered Agent and Registered Office shown on the rec				
	Paul A. Brevard	ords of the Florida De	ept, of State.		
	Registered Office Address 1 Beech Blvd.	REET ADDRESS)			
	Port Orange	32128 . FL			
				₩ 22 22 22 22 22 22 22 22 22 22 22 22 22	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Reg</u>	gistered Office addre	<u>w</u> :	2019 FEB SECRET I ALLAHI	>
	Juliet Sheree Brevard			HASSI B 19	FILE
	NEW Registered Office Address:	•		F 9	
	1 Beech Blvd.			EL 0 21/	
	Port Orange	32128 , FL			=
the cha agent v was/wa	imited liability company is not organized under ange or changes are made, the Florida street addi will be identical. Or, in the case of a Florida lim ere authorized by an affirmative vote of the men inless of organization or the operating agreement	the laws of the St ress of the registe nited liability com nbers of the limite of the limited liab	ate of Florida, it is here red office and the busing pany, it is hereby confir d liability company or a pility company.	ess office of the med that the cha	registered nge(s)
	beet touch		A. Brevard		
•	ture of a member or authorized representative of a member		Printed or typed	_	
provisi the obl to mere	by accept the appointment as registered agent a ions of all statutes relative to the proper and con ligations of my position as registered agent as p ely reflect a change in the registered office addr d in writing of this change.	DDDC212 DC27687DC1D	ce of my duties, and f ai	n tamilaar with a	nd accent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00