

LIS 000146952

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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M. MILLIGAN
EXAMINER

SEP - 8

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Empower Coaching & Fitness 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:

Anastasia Smith

Name of Person

Firm/Company

405 Lake Monroe Place

Address

St Augustine FL 32092

City/State and Zip Code

stancza@hotmail.com

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

For further information concerning this matter, please call:

anastasia smith 724 3512973
Name of Person at () 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

**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.

Empower Coaching & Fitness LLC

1. Name of the limited liability company: 405 lake monroe place (b) 405 lake monroe place

2. (a) Principal office address of limited liability company:
*(Note: **MUST BE STREET ADDRESS**)*
st augustine fl 32092
(b) Mailing address of limited liability company:
*(Note: **MAY BE POST OFFICE BOX**)*
st augustine fl 32092

8/27/2015

L15000146952

3. Date of filing/registration in Florida 4. Document number
united states corporation agent inc

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
13302 winding oak court

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
suite A

Tampa, FL 33612

Stacey Smith

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

405 lake monroe place

NEW Registered Office Address:

st augustine, FL 32092

FILED
2015 SEP -6 AM 8:35
STATE DEPT OF STATE
TALLAHASSEE FL 32314

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

Anastasia Smith
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