## 115000159970

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(Document Number)						
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SECRETARY OF STATE BIVISION OF CORPORATIONS

B FIGUEROA JAN 05 2018

## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: Varn Equipment Leasing LLC						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter	to the following:					
Donald Varn						
Name of Person	· <del></del>					
Varn Equipment Leasing LLC						
Firm/Company	<del></del>					
3601 Gordy Road						
Address	<del></del>					
Fort Pierce, FL 34945						
City/State and Zip Code	<del></del>					
RVarn@irexp.COM						
E-mail address: (to be used for future annual report	t notification)					
For further information concerning this matter, please ca	ill:					
Donald Varn 77	2 201-5320					
Name of Person	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					
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.

1. Na	ame of the limited liability company:	Vam Equipm	ent Le	asing LLC	<u> </u>	
2. (a)	1808 Hazelwood Drive		(b) 1808 Hazelwood Drive			
()	Principal office address of limited liabili (Note: MUST BE STREET ADD		_ (	/	Mailing address of limi (Note: MAY BE PO	
	Fort Pierce, FL 34982		_	Fort Pie	rce, FL 34982	
	9/14/2015		_	L150001	59970	
3.	Date of filing/registration in Fl	lorida	4.		Document number	r
5. (a)	Varn, David R					
(-)	Registered Agent and Registered Office shown of	on the records of th	e Florida	Dept. of State	- e:	
	1808 Hazelwood Drive					
	Registered Office Address (MUST BE FLO	RIDA STREET AI	DDRESS	2	_	
	Fort Pierce	, FL_	34982		_	<b>3</b>
413						SION
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_	FILED TARY OF OF CORPO	
	Varn, Donald				EU OF STATE ORPORATIONS PH 3: 39	
	NEW Registered Office Address:				-	STATE ORATION 3: 39
	3601 Gordy Road				-	- 78 - 1
	Fort Pierce	, FL <sup>3</sup>	34945			
the cha agent v was/wo	imited liability company is not organized inge or changes are made, the Florida strail be identical. Or, in the case of a Florice authorized by an affirmative vote of the clestof organization or the operating agr	eet address of the rida limited liab the members of	he regis pility co the lim imited l	stered office impany, it is ited liability	e and the business of s hereby confirmed y company or as of apany.	office of the registered that the change(s)
Signa	ture of a member or authorized representative of a	ı member		id it vall	Printed or typed name	of signee
provisi he obl to mere	by accept the appointment as registered ons of all statutes relative to the proper igations of my position as registered agely reflect a change in the registered officing writing of this change.	agent and agree and complete p int as provided ce address, I he	e to act perform for in C ereby co	in this cape ance of my e hapter 605 onfirm that i	acity. I further agr duties, and I am fai , F.S. Or, if this do the limited liability	ee to comply with the miliar with and accept ocument is being filed company has been
Signatu	re of Registered Agent	<del></del>				