

L15000176809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

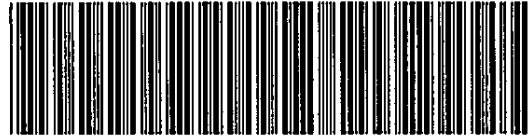
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2015 NOV 10 P 1:33

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 30, 2015

BRUCE CAMPBELL  
1712 CLYDESDALE DRIVE  
LOXAHATCHEE, FL 33470

SUBJECT: SAVANNA INDUSTRIES LLC  
Ref. Number: L15000176809

We have received your document for SAVANNA INDUSTRIES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

You may comply with this request via fax. Please fax correction(s) to the attention of the undersigned examiner at 850-245-6030.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason  
Regulatory Specialist II

Letter Number: 415A00023011

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Savanna Industries 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:

Bruce Campbell  
Name of Person

Savanna Industries LLC  
Firm/Company

1712 Clydesdale Dr.  
Address

Loxahatchee, FL, 33470  
City/State and Zip Code

sales@savannaindustries.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bruce Campbell at (631) 655-5042  
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

**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: Savanna Industries LLC

2. (a) 1712 Clydesdale Dr. Loxahatchee FL 33470 SAME  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

3. Date of filing/registration in Florida

4. Document number L15000176809

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

6101 NW 68<sup>th</sup> Ter, Tamarac, FL  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

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

1712 Clydesdale Dr.  
**NEW Registered Office Address:**  
Loxahatchee  
FL 33470

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TALLAHASSEE, FLORIDA

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.

Bruce Campbell  
Signature of a member or authorized representative of a member

Bruce Campbell  
Printed or typed name of signer

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