

L15000203062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

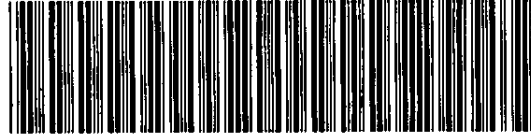
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 FEB 29 PM 4:03

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Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 12, 2016

CYRUS HART
2922 S FALKENBURG ROAD
RIVERVIEW, FL 33578

SUBJECT: ELITEWARE, LLC
Ref. Number: L15000203062

RECEIVED
2016 FEB 25 PM 5:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for ELITEWARE, 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):

PLEASE COMPLETE SECTION B ON THE APPLICATION

Please return your document, along with 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.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 815A00026185

COVER LETTER

RECEIVED
2016 FEB 11 AM 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: Eliteware 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:

Name of Person

Firm/Company

Address

City/State and Zip Code

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

For further information concerning this matter, please call:

Mark Izzolino at (813) 675 3422
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: Elite Ware LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

3104 W Wyming Ave
Tampa FL 33611

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

3. _____ Date of filing/registration in Florida 4. _____ Document number

5. (a) G J Flanagan Hart, Cyrus

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2923 S. Finkenberg Rd.
Mia Cir

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

River view / FL 33578
Largo, FL 33774

(b) _____

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

G J Flanagan

NEW Registered Office Address:

12905 Mia Cir

Largo, FL 33774

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]
Signature of a member or authorized representative of a member

Cy Hart
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.

G J Flanagan
Signature of Registered Agent

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