

L16000 004 798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800333131178

08/15/19--01012--004 *\$25.00

2019 AUG 15 AM 11:41

Y SULKER
AUG 21 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Good guys golf carts
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:

Rory Royson
Name of Person

good guys golf carts
Firm/Company

19313 US 41 N
Address

Lutz FL 33549
City/State and Zip Code

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

For further information concerning this matter, please call:

Rory Royson at (813) 494-7994
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: Good guys golf carts

2. (a) 19313 US 41 N (b) 19313 US 41 N

Principal office address of limited liability company:

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

Lutz FL 33549

Mailing address of limited liability company:

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

Lutz FL 33549

3. 8-12-19
Date of filing/registration in Florida

4. _____
Document number

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

19313 US 41 N

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

_____. FL _____

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

19313 US 41 N

NEW Registered Office Address:

Lutz . FL 33549

2-15 AUG 15 AM 11:41

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

Rory Royson
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]
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00