

**L16000029835**

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

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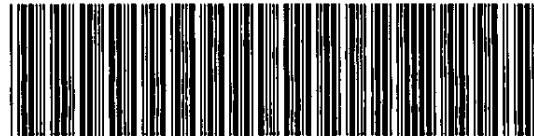
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(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**S. YOUNG**

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SOUTH FLORIDA STUCCO & EXTERIORS, 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:

LEONARD LESK

Name of Person

Firm/Company

7732 NW 75TH PLACE

Address

TAMARAC FL 33321

City/State and Zip Code

LENNY @ FULKE.PAS.COM

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

For further information concerning this matter, please call:

LEONARD LESK

Name of Person

at ( 631 ) 499-6666

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)

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TALLAHASSEE, FLORIDA  
16 DEC 12 PM 4:10

**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: SOUTH FLORIDA STUCCO & EXTERIORS, LLC
2. (a) 2701 NW 107<sup>th</sup> AVENUE  
Principal office address of limited liability company.  
(Note: **MUST BE STREET ADDRESS**)  
CORAL SPRINGS FL 33065
- (b) 2701 NW 107<sup>th</sup> AVENUE  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
CORAL SPRINGS FL 33065
3. 02/01/2016  
Date of filing/registration in Florida
4. L 16000029835  
Document number
5. (a) LEONARD LESH  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
7732 NW 78<sup>th</sup> PLACE  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
TAMARAC, FL 33321
- (b) JAY PRESSER  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
2701 NW 107<sup>th</sup> AVENUE  
**NEW Registered Office Address**:  
CORAL SPRINGS, FL 33065

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.

SPRESSER  
Signature of a member or authorized representative of a member

SHYLA PRESSER  
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.*

JM  
Signature of Registered Agent

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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FL 32314  
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