

**L16000047271**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

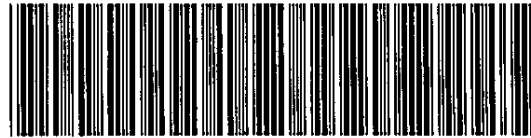
\_\_\_\_\_  
(Business Entity Name)

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

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2016 DEC 29 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**S Warren**  
**DEC 30 2016**

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: One Source Threads 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:

Alexander Santana  
Name of Person

One Source Threads LLC  
Firm/Company

851 S. State Rd 434 Suite 1070-347  
Address

Altamonte Springs, FL 32714  
City/State and Zip Code

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

For further information concerning this matter, please call:

Alexander Santana at ( 321 ) 370-5383  
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: One Source Threads LLC

2. (a) \_\_\_\_\_ (b) Same as (A)  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

851. S State Road 434  
Suite 1070-347 Altamonte Springs  
FL 32714  
3/7/2016

L16000047271

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

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

8516. State Road 434 Suite 1070-347  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

~~Altamonte Springs~~

Altamonte Springs, FL 32714

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

Casey R. Otto

NEW Registered Office Address:

4037 Oriole Ave.

Port Orange, FL 32127

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.

Alexander Santana

Signature of a member or authorized representative of a member

Alexander Santana

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

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TALLAHASSEE, FLORIDA