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J. LEGGETT MAR 2 2 2018

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 1ACPRO 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:
Mykhailo Sorocher Name of Person
iacpro LLe Firm/Company
1807 WORRINGTON ST Address
SARASOTA FL 3423 / City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mykhqi Co Soroche Jat (941) 275 51 20 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 Conv

INHS18 (2/14)

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:
2. (a) 1807 WORRINGTON ST (b) 1807 WORRINGTONS
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BON) CAPACOTA TO OVER 15 OF THE TOO OVER 15 OF TOO OVER 15 OF THE TOO OVER 15 OF THE TOO OVER 15 OF TOO OVER
SARASOTA, FC, 34231 SARASOTA, FL, 3423
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April 04,2016 L 160000 66550
3. Date of filing/registration in Florida 4. Document number
5. (a) Mykhçilo Sorochev
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1807 WORRINGTON ST
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
යා -
CHEASOTA 3423/
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
1455 TALLEVAST RD
NEW Registered Office Address:
SARASOTA BL 34243
If the limited lightlity company is not organized under the laws of the State of Floridy, it is hereby confirmed that after
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 oberating agreement of the limited liability company
Mykhailo Sorocher
Signature of a member or authorized representative of a member 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 of Registered Agent

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