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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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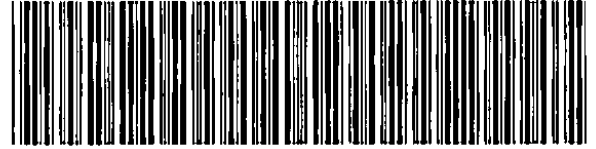
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cole Talty LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cole A. Talty

Name of Person

Firm/Company

175 1st St. S., Apt 306

Address

St. Petersburg, FL 33701

City/State and Zip Code

coletalty@verizon.net

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

For further information concerning this matter, please call:

Cole A. Talty

813

484-4098

at (_____) _____

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 AGENT OR REGISTERED OFFICE OF
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 Florida.

1. Name of the limited liability company: Cole Talty LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

Mailing address of limited liability company

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

175 1st St S., Apt 306

175 1st St S., Apt 306

St. Petersburg, FL 33701

St. Petersburg, FL 33701

05/05/2016

L16000086101

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

5. (a) Cole A. Talty

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3909 W. Empedrado St.

Tampa, FL 33629

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

NEW Registered Office Address:

175 1st St S., Apt 306

St. Petersburg, FL 33701

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that all 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 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.

Cole A. Talty
Signature of a member or authorized representative of a member

Cole A. Talty

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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and understand 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.

Cole A. Talty
Signature of Registered Agent

2019 JUL -5 AM 9:19
SECRETARY OF STATE
FLORIDA