

L16000088939

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

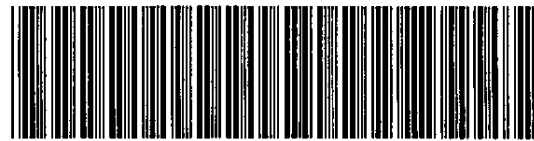
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Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Snipe Show, 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:

Michael Rainisch

Name of Person

Snipe Show, LLC

Firm/Company

10293 Emerson St

Address

Parkland, FL 33076

City/State and Zip Code

mrainisch@yahoo.com

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

For further information concerning this matter, please call:

Michael Rainisch

954

918-2721

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 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.

Snipe Show, LLC

1. Name of the limited liability company: Snipe Show, LLC
2. (a) 10293 Emerson St (b) 10293 Emerson St

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Parkland FL 33076

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

Parkland FL 33076

May 5, 2016

L16000088939

3. May 5, 2016 Date of filing/registration in Florida 4. L16000088939 Document number

Michael Rainisch

5. (a) Michael Rainisch
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
10293 Emerson St

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

Parkland 33076
FL

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

5645 Coral Ridge Dr #210

NEW Registered Office Address:

Coral Springs 33076
FL

16 SEP 19 PM 12:19
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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.

Michael Rainisch
Signature of a member or authorized representative of a member

Michael Rainisch
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.

Michael Rainisch
Signature of Registered Agent