

216000094654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

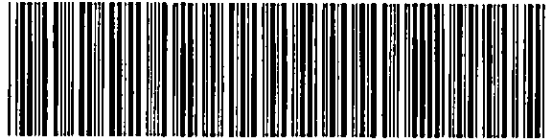
(Business Entity Name)

(Document Number)

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FILED
DEC 11 2018

D. SCOTT
DEC 12 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sebastian Cleaning 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:

Kristin Sebastian

Name of Person

Sebastian Cleaning LLC

Firm/Company

1625 Lightsey Road

Address

St. Augustine, FL 32084

City/State and Zip Code

Kristin@SebastianCleaning.com

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

For further information concerning this matter, please call:

Kristin Sebastian 904 599-2507

Name of Person at () 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

FILED
JUN 10 9 11 AM '14

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:

1625 Lightsey Road, St. Augustine, FL 32

2. (a)

(b)

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

L16000094654

3.

4.

Document number

5. (a)

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

(b)

1625 Lightsey Road, St. Augustine, FL 32084

32084

FL

Kristin Sebastian

Printed or typed name of signee

Signature of Registered Agent

INIS18 (2/14)