

L16 0000 97047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

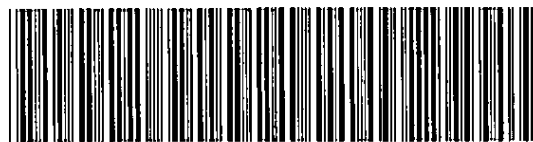
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900374006469

09 28 31--01015--009 **25.00

2021 SEP 28 PM 12:00

SEP 28

Rt/chg

OCT 08 2021 •

ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lake Helen Auto, 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:

Joseph D Medders

Name of Person

Lake Helen Auto, LLC

Firm/Company

2750 N Volusia Ave

Address

Orange City FL 32763

City/State and Zip Code

lakehelenauto@yahoo.com

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

For further information concerning this matter, please call:

Joseph D Medders

386 785-9047
at ()

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Lake Helen Auto, LLC

2. (a) 2750 N Volusia Ave Orange City FL 32763 (b) 2750 N Volusia Ave Orange City FL 32763

Principal office address of limited liability company:
(*Note: **MUST BE STREET ADDRESS***)

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

05/18/2016

L16000097047

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

5. (a) Joseph D Medders

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

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

597 Pleasant Street Suite A

Lake Helen, FL 32744

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

NEW Registered Office Address

2750 N Volusia Ave

Orange City, FL 32763

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.

Signature of a member or authorized representative of a member

Joseph D Medders

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

2021 SEP 28 PM 12:00