

26000111717

(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



900320080639

10/29/18--01006--020 **25.00

FILED
18 OCT 29 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BL VORISEK
NOV 15 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida Low Volt 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:

Karl E Everidge Jr
Name of Person

Florida Low Volt LLC
Firm/Company

P O Box 8540
Address

Fleming Island, FL 32006
City/State and Zip Code

Karl.Everidge@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karl E Everidge Jr at (478) 338 2905
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.

1. Name of the limited liability company: Florida Low Volf LLC

2. (a) Karl E Everidge Jr

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

180-168 Banners Walk Ct

Jacksonville, FL 32258

(b) Karl E Everidge Jr

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

PO Box 8540

Fleming Island, FL 32006

3. 06/09/2016
Date of filing/registration in Florida

4. L16000111717
Document number

5. (a) Karl E Everidge Jr
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

4526 Banners Walk Ct
Jacksonville, FL 32258

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

NEW Registered Office Address:

1518 Roseberry Ct
Fleming Island, FL 32003

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.

Karl E Everidge Jr
Signature of a member or authorized representative of a member

Karl E Everidge Jr
Printed or typed name of signer

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.

Karl E Everidge Jr
Signature of Registered Agent

FILED
18 OCT 29 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA