LIL 000 112651

(Requestor's Name)							
(Address)							
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PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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COVER LETTER

Division of Corporations		
Citrus Computer Services LLC		
	Limited Li	lability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office C	Change and	fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the	following:
Richard Roy		
Name of Person		
Citrus Computer Services LLC		
Firm/Company	·	_
7178 N Maltese Dr.		
Address		•
Citrus Springs, FL 34433		
City/State and Zip Code		
richard.roy3113@gmail.com		
E-mail address: (to be used for future annual	report notif	ication)
For further information concerning this matter, plea	ase call:	
Richard Roy	954 it (551-4428
Name of Person	August annuarisation annuaris vi annia	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Hahassee, Florida 32314
Enclosed is a check for the following am	ount:	
☑ \$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.

I. Na	ome of the limited liability company: Citrus Compu	ter Se	ervi	ices LLC	·			***************************************	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 7178 N Maltese Dr.		(b)	2	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 78 N Maltese Dr.				
	Citrus Springs, FL 34433		Citrus Springs, FL 34433						
	6/10/2016		L	1600011	12651				
3.	Date of filing/registration in Florida	- 41.	_		Document nun	nber			
	United States Corporation Agents, INC								
5. (a)	Registered Agent and Registered Office shown on the records of t	he Flori	da I	Dept. of State	– e:				
	United States Corporation Agents, INC			•					
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>SS)</u>		<u>.</u>				
	13302 Winding Oak Court A					코 _오			
	Tampa , FL	33612	2	m steel nich sone pro- de AM desid straten		ECRETARY OF SHAFE	7 MAR	er de ege marge	
						ASS	1	es 1+7 K ess Significandes	
(b)	Enter name of NEW Registered Agent and/or NEW Registered					EEO			
	The state of the s	SZ.I.I.S.	13534.1				;;		
	Richard Roy						52	dept.	
	NEW Registered Office Address:				_	> m	. •		
	7178 N Maltese Dr.								
	Cotrus Springs, FL_	3443(3		_				
the cha agent v was/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	s of the region of the region of the li	ne S 2iste con mit I lia	itate of Flo ered office apany, it i ed liabilit	orida, it is heret e and the busing s hereby confir y company or a npany.	ess office med that t	of the the cha	registered ange(s)	
Signa	ture of a member or authorized representative of a member				Printed or typed	nanic of sig	nee		
I here provisi the obi	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	ee to a perfor I fôr in ièreby	et i man i Cl voi	n this cap we of my lapter 602 ifirm that	oacity. I further duties, and I an 5, F.S. Or, if th the limited liab	agree to n familiar is docume ility comp	compl with ent is l cany li	y with the and accept peing filed as been	
Signatu	re of Registered Agent								
	Division of Corporations P.O. I	30x 63	27	Tallahas	ssee, FL 32314				

FILING FEE: \$25.00