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SECRETARY OF STATE

FILED

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: PREFERRED NOTARIES, 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:			
RIAN VAN SUSKIRK Name of Person			
PREFERED NOTARIES, UC Firm/Company			
19827 MORDEN BLUSH DR Address			
City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
RYAN VAN SUSYIEK at (813) 753-6430  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 \$25 Filing Fee & Certified Copy  INHS18 (2/14)			

## 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.

rwriae	$\bigcap$	<b>,</b> \
l. Na	Name of the limited liability company: VREFERLES	NOTARIES, LLC
2. (a)	(b	)
()	Principal office address of limited liability company:	Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)	(Note: MAY BE POST OFFICE BOX)
	19827 MORDEN BLUSH DR	19827 Morden Scusu DR
	Luz fe 33558	Luz, Fr 33558
	JUNE 13, 2016	L16000 113 566
3.	Date of filing/registration in Florida 4.	Document number
5. (a)	a) LEGALING CORPORATE SERVICES INC	<del>-</del>
	Registered Agent and Registered Office shown on the records of the Florida	Dept. of State:
	5237 Summer In Commons	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS	2
	Suite 100	38 1
	FORT MYERS , FL 3	<u>\$90 +</u>
44.5	RUAN VANR	FILED FILED
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office ad	dress:
	Enter name of NEW Registered Agent and/or NEW Registered Office ad	STA: 5
		AND A TE
	NEW Registered Office Address:	
	19827 MORDEN DUST DR	
	1	CCR
		<u> </u>
If the l	e limited liability company is not organized under the laws of the	State of Florida, it is hereby confirmed that after
the cha	change or changes are made, the Florida street address of the regis	stered office and the business office of the registered
agent v	nt will be identical. Or, in the case of a Florida limited liability co were authorized by an affirmative vote of the members of the lim	ompany, it is hereby confirmed that the change(s)
the art:	articles of organization or the operating agreement of the limited	liability company.
		LYAN VANISUSKIRK
Signa	enature of a member or authorized representative of a member	Printed or typed name of signee
I here	ereby accent the appointment as registered agent and agree to ac-	t in this capacity. I further agree to comply with the
provis	visions of all statutes relative to the proper and complete perform	ance of my duties, and I am familiar with and accept
to mer	visions of all statutes relative to the proper and complete perform obligations of my position as registered agent as provided for in Guerely reflect a change in the registered office address, I hereby c	onfirm that the limited liability company has been
notific	fied in writing of this change.	
Signati	nature of Registered Agent	
O.1 E		