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SECRETARY OF STATE
AND ASSEFT, FLORIDA

K. SALY EXAMINER

## **COVER LETTER**

Division of Corporations	
SUBJECT: LAWILL Na	FABRICATIO」 LLC me of Limited Liability Company
Dear Sir or Madam:	
2001 211 01 1/20001111	
The enclosed Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing.
Please return all correspondence concerning to	his matter to the following:
WILLIAM ELL Name of Person	15
LAWILL FABRICA Firm/Company	ATION LLC
1004 MANATEE RD. H Address	-107
NAPLES, FLORIDA 3 City/State and Zip Code	4114
E-mail address: (to be used for future an	nual report notification)
For further information concerning this matter	r, please call:
	at ( 239-) 784-0978
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	g amount:
\$25 Filing Fee	□ \$55 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 provision's 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. Na	me of the limited liability company: LAWILL FABRICATION LLC
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  (b) LAWRENCE J. MARCH BANKS  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	13344 COUNTY RD. 245W 13344 COUNTY RD. 245W
	OXFORD, FL, 34484 DXFORD, FL. 34484
•	Date of filing/registration in Florida  L 16000 1150 22  Document number
3.	Date of filing/registration in Florida 4. Document number
5. (a)	LAWRENCE JMARCHBANKS
()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	10 05 15 7 10 1004/1004
	LAWRE~CE J. MARCHBANKS Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	13344 COUNTY RD. 245W
	OX FORD ,FL 34484  OX FORD ,FL 34484  Enter name of NEW Registered Agent and/or NEW Registered Office address:  U1LLIAM ELLIS  U1LLIAM ELLIS
71-3	
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	To 3
	NEW Registered Office Address:
	1004 MANATEE RD. H-107
	NAPLES ,FL 34114
the charagent was/was/was/was/was/was/was/was/was/was/	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ange or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.    William Elli   ture of a member or authorized representative of a member   Printed or typed name of signee     by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept
the ob- to mer notifie	by accept the upportant as registered agent and accept ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been d in writing of this change.

Willia

Signature of Registered Agent

- Ellis