

L160000134960

(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



900289987159

03/12/16--01019--023 **55.00

S Warren

SEP 27 2016

2016 SEP 26 A 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 15, 2016

DOUGLAS HUD MATHES
1551 HWY. 2
WESTVILLE, FL 32464

SUBJECT: H&K REMODELING LLC
Ref. Number: L16000134960

We have received your document for H&K REMODELING LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE SIGN THE ENCLOSED DOCUMENT IN BOTH PLACES AND RETURN

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren
Regulatory Specialist II

Letter Number: 916A00019711

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hiscox

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:

Douglas Hud Mathes Kelly R. Stride

Name of Person

H&K Remodeling

Firm/Company

1551 Hwy 2

Address

Westville, Florida 32464

City/State and Zip Code

cptnhud@aol.com

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

For further information concerning this matter, please call:

Hud Mathes

at (

850-496-4353

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: H&K REMODELING LLC

2. (a) Principal office address of limited liability company:
*(Note: **MUST BE STREET ADDRESS**)*
1551 HWY. 2
WESTVILLE, FL 32464

(b) Mailing address of limited liability company:
*(Note: **MAY BE POST OFFICE BOX**)*
1551 HWY. 2
WESTVILLE, FL 32464

7/20/16

L16000134960

3. Date of filing/registration in Florida

4. Document number

5. (a) SUNBIZ SUPPORT, LLC

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

16913 LAKESIDE DRIVE

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

MONTVERDE, FL 34756

(b) DOUGLAS HUD MATHES

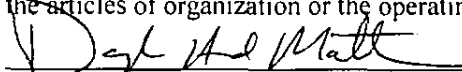
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

1551 HWY. 2

NEW Registered Office Address:

WESTVILLE, FL 32464

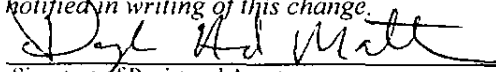
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida 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

DOUGLAS H. MATHES

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

FILED
2016 OCT 25 A 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA