

L16000 178943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

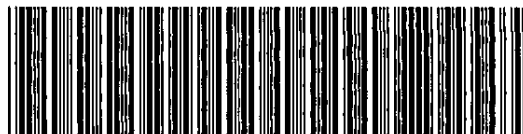
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TALLAHASSEE, FLORIDA

AUG 05 2016

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fishing Vibes
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:

Dwight S. Lawrence
Name of Person

Fishing Vibes
Firm/Company

1746 E. Silverstar rd suite 135
Address

Ocoee, FL 34761
City/State and Zip Code

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

For further information concerning this matter, please call:

Dwight S. Lawrence at (321) 303-3196
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: Fishing Vibes
2. (a) 1746 E. Silver Star Rd
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Suite 135
Ocoee, FL 34761
- (b) 1746 E. Silver Star Rd
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Suite 135
Ocoee, FL 34761
3. July 25, 2016
Date of filing/registration in Florida
4. L16000138943
Document number
5. (a) Dwight S. Lawrence
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
7213 Harbor Heights Circle
Registered Office Address (Note: **MUST BE FLORIDA STREET ADDRESS**)
Orlando, FL 32835
- (b) Dwight S. Lawrence
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
1746 E. Silver Star Road
NEW Registered Office Address:
Suite 135
Ocoee, FL 34761

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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.

Jackeline Mojica
Signature of a member or authorized representative of a member

Jackeline Mojica
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.

Dwight S. Lawrence
Signature of Registered Agent