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RARDICHE

APP 1 3 2020 LALBRITION

COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations	• • •	
Laura Cala I I C		
SUBJECT: Laura Cole LLC		
Nar	me of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning th	nis matter to the following:	
Laura Cole		
Name of Person		
Laura Cole LLC		
Firm/Company		
2001 Wedge Ct		
Address		
Sun City Center, FL 33573		
City/State and Zip Code		
Hlsharplin@yahoo.com		
E-mail address; (to be used for future an	nual report notification)	
For further information concerning this matter	please call:	
Laura Cole	at (813) 484-6428	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following	g amount:	
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	



ROTALEN

2020 APR 13 AH 11:34

April 1, 2020

LAURA COLE 2001 WEDGE CT SUN CITY CENTER, FL 33573

SUBJECT: LAURA COLE LLC Ref. Number: L16000160771

We have received your document for LAURA COLE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

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) 245-6050.

Letter Number: 420A00007093

Irene Albritton Regulatory Specialist II

www.sunbiz.org

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 695.0116, 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

(a)	2001 Wedge CT Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 2001 Wedge Ct Sun City Center, FL 33573		(b) 2001 Wedge Ct Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
(a)					
			2001 Wedge Ct Sun City Center, FL 33573		
	08/26/2016		L1600016	0771	
	Date of filing/registration in Florida	4.		Document number	
(a)	Michael Reedy CPA				
(Registered Agent and Registered Office shown on the records of	:			
	305 N Parsons Ave				
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRES	55)		
				70	
	Brandon, FL 33510				
(b)	Harold Sharplin			2020 IPR 13 PH 3:31	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			2	
	2811 Garden Dr. S. #210			ا بن ـــ	
	NEW Registered Office Address:			- <u>- </u>	
	Lake Worth, FL 33461				
	, FL				
the !	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of	the reg ability of of the li	gistered office company, it is mited liability	and the business office of the registe hereby confirmed that the change(s) company or as otherwise provided i pany.	
e cha gent v as/wa e arti	icles of organization or the operating agreement of the Sama Cole ture of a member or authorized representative of a member	1		Printed or typed name of signee	

in merely reflect a change in the registered agent as provided for in Chapter 603, F.S. Or, if this document is being filed in merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this phange.

Signature of Registered Agent