

L16 000210240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

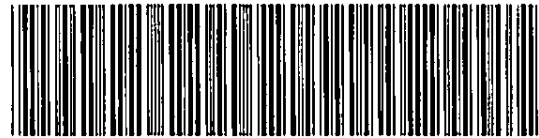
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 26 2017
J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cody's American Motorcycle Repair 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:

Cody Spencer
Name of Person

Cody's American Motorcycle Repair LLC
Firm/Company

501 W Dr. Martin Luther King Jr. Blvd
Address

Seffner, FL 33584
City/State and Zip Code

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

For further information concerning this matter, please call:

Cody at (813) 477-2298
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: _____
2. (a) 501 W Dr. Martin Luther King Blvd (b) 501 W Dr. Martin Luther King Blvd
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
Seffner, FL 33584 Seffner, FL 33584
3. November 16, 2016 4. November 16, 2016
Date of filing/registration in Florida Document number
5. (a) Wesley W. Spencer
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
10514 Lithia Pinecrest Rd.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Lithia FL 33547
- (b) Wesley W. Spencer
Enter name of NEW Registered Agent and/or NEW Registered Office address:
305 W Jersey Ave
NEW Registered Office Address:
Brandon FL 33510

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TALLAHASSEE, FLORIDA

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.

Wesley Spencer
Signature of a member or authorized representative of a member

Wesley Spencer
Printed or typed name of signer

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.

Wesley Spencer
Signature of Registered Agent