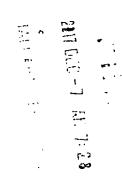
## L16000222785

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J. HARRIS

## COVER LETTER

	ration Section on of Corporations					
SUBJECT: _	SYSTEM	PROTECTION Name of Lim	/ ENGINEERING , Lited Liability Company	UC		
Dear Sir or Ma	ndam:					
The enclosed F	Registered Agent/R	gistered Office Chang	ge and fee(s) are submitted for f	iling.		
Please return a	Il correspondence c	oncerning this matter	to the following:			
		EVRELL Person W ENGINEER pany				
142 1	KE LSO COL Address	ILT.	<del> </del>			
LA:KE	MARY FL City/State and	32746 Zip Code				
Email ac	ddress: (to be used t	s proteng. Corfuture annual repor	t notification)			
For further inf	ormation concerning	g this matter, please ca	ıll:			
JAMES	C. FERRE	at (	407 ) 739-4375 Area Code & Daytime	Telephone Number		
Regist Divisi Cliftor 2661 I	ET/COURIER AD ration Section on of Corporations n Building Executive Center Cinassee, Florida 3230	! rcle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclo	Enclosed is a check for the following amount:					
<b>□</b> \$25	Filing Fee	1	□ \$55 Filing Fee & Certified	Сору		
INHS18 (2/14)		1				



November 29, 2017

JAMES C FERRELL 142 KELSO COURT LAKE MARY, FL 32746

SUBJECT: SYSTEM PROTECTION ENGINEERING, LLC

Ref. Number: L16000222785

We have received your document for SYSTEM PROTECTION ENGINEERING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Jenna D Harris | Regulatory Specialist II

Letter Number: 417A00024088

## 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 10/144	·									
1. Na	me of the limited liability	company:	SYSTEM	Pa	OTEC	TION	EN6	WEE	<u>ewa</u>	,4C
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2. (a) _	Principal office address				(0)_					liability company:
	(Note: MUST BE					•	-			OFFICE BOX)
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	LAME MARY	FL	32746		_	LAKE	MA	Ry,	1- <u>L</u>	32746
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	01/01/2				_	<u>. Lio</u>	600	0222	<u>.785</u>	<del>-</del>
3.	Date of filing/reg	istration is	ı Florida	4			Docur	ment nui	nber	
5 ( )	IFICALTAG	· · ^ ^ A P	- A-P S	e di an	,					
5. (a)	LEGALINC Registered Agent and Registere						- ••			
	Registered Agent and Registere	1 Office silo.	wit on the record	is or the r	torida 12	cpt. or state				
	5237 SUMME	RLIN	COMMONS	<u> </u>						
	Registered Office Address (	<u>IUST BE F</u>	LORIDA STRE	EET ADD	RESS)					N-3
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(0)	Enter name of NEW Registere			tered Off	ce addr	ess:	-			
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	NEW Registered Office Addre	ss:								
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	LAKE MARY	<del></del>		, FL	<i>56</i>	'7Ψ	-			
If the li	mited liability company is	not organ	ized under th	e laws c	f the S	tate of Flo	orida. i	it is here	by con:	firmed that after
the cha	nge or changes are made.	he Florida	a street addres	ss of the	registe	ered office	e and t	he busin	ess off	ice of the registered
agent v	vill be identical. Or in the	case of a	Florida limite	ed liabil	ity con	ipany, it i	s heret	oy contir	med th	at the change(s)
was/we	ere authorized by an affirm cles of organization or the	operating	of the members of	ers of tr f the lim	e umu ited lia	ed Habiii ibility con	y com nnany.	pany or a	as omei	iwise provided in
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	fame C. Fen	41	. a.C.ab.o.	-	J	AMES	Printo	HERR doctored	Pare of	
-								>		
I heret	by accept the appointment	as registed	red agent and per and come	l agree :	to act i. forma	n this cap ace of my	acity. duties:	I further and I a	r agree m famii	to comply with the liar with and accept
the obl	igations of my position as	registered	agent as pro	vided fo	r in Cl	apter 60:	5, F.Ş.	Or, if if	us doci	ument is being filed
to mere	by accept the appointment ons of all statutes relative igations of my position as ily reflect a change in the d in writing of this change.	registered	office addres	s. I her	eby con	ijirm that	ine lin	niied Iidi	эшу со	ompany nas been
/	1. (4.	1								
Signatu	Jany C. Tene te of Registered Agent	\frac{1}{2}		-						