## L16000 229 842

(Requestor's Name)		
(Address)		
(Address)		
( (dailess)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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JAN 17 2017 J. HARRIS

## **COVER LETTER**

Division of Corporations		
SUBJECT: Reliable Business Development 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:		
Oustin Sprowle Name of Person	<del></del>	
Firm/Company		
anon Montague St. Address		
Tampa FL, 33626 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Person at (305) 922-6927  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	
INIUC19 (2/14)		

## 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: Keliable	Susiness Development LL
2. (a) 9767 Montague St.	b)
Principal office address of limited hability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Tampa FL. 33U24	
3. Date of filing/registration in Florida 4.	L16000229842  Document number
5. (a) Tystin Sprowle	
Registered Agent and Registered Office shown on the records of the Florid	la Dept. of State:
Registered Office Address (MUST BE FYGRIDA STREET ADDRES	<u>(S)</u>
Tampa IIL	
, FL	3rg/ = = = = = = = = = = = = = = = = = = =
(b) LEWIS Weich	<u> </u>
Enter name of NEW Registered Agent and/or NEW Registered Office a	ddress:
6401 S Westshore Blv NEW Registered Office Address:	12 12 13 13 13 13 13 13 13 13 13 13 13 13 13
# 1207	<del> </del>
Tampa , FL 33	<u> </u>
If the limited liability company is not organized under the laws of the the change or changes are made, the Florida street address of the regagent will be identical. Or, in the case of a Florida limited liability company was/were authorized by an affirmative vote of the members of the limited articles of organization or the operating agreement of the limited.  Signature of a member of authorized representative of a member	istered office and the business office of the registered company, it is hereby confirmed that the change(s) mited liability company or as otherwise provided in
I hereby accept the appointment as registered agent and agree to acceptovisions of all statutes relative to the proper and complete perform the obligations of my position as registered agent as provided for in to merely reflect a change in the registered office address, I hereby notified in writing of this change.	ct in this capacity. I further agree to comply with the cance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed confirm that the limited liability company has been
Signature of Registered Agent	