L17000027667

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. (Ad	dress)	
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ALLAHASSEE, FLORIDA

S Warren

MAY - 8 2017

		COVER LETTER
TO:	Registration Section Division of Corporations	
SUBJ	лест: <u>GO</u>	ATW LLC
	Nai	me of Limited Liability Company
Dear	Sir or Madam:	
The e	nclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.
Please	e return all correspondence concerning th	nis matter to the following:
	Michael Moesch Name of Person	
	ED ATW LLC	
	Firm/Company	
	2428 Lake Vista Ct. A	Apt. 308
	City/State and Zip Code	7
	Michael. D. Moesch @ anail. C E-mail address: (to be used for future an	
For fu	urther information concerning this matter	r, please call:
	Michael Moesel Name of Person	at (772) 530 - 2544 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	g amount:
	¥\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

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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.	Na	me of the limited liability company:	ATW	U LLC	
2.	(a) .	2428 Lake Vista Ct. Apt. 308 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	.08
		Casselbury, FC		Casulbury, FL	
		22-		7 .	
		32707	_ _	32707	
		02/03/2017 Date of filing/registration in Florida		L17000027667	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	Michael Moesch			
		Registered Agent and Registered Office shown on the records of the	ie Florida Do	Dept. of State:	
		2601 Wells Ave Ste 161			
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		
		mm Fea Park , FL	3273	30 SECON 3	
	(b)	Michael Moesch		#ASS	
		Enter name of NEW Registered Agent and/or NEW Registered	Office addre	ress:	
		2428 Lake Vista Ct April.	88	FLORE STATE	
		NEW Registered Office Address:			
				<u> </u>	
			3270	o7	
If t	he li	mited liability company is not organized under the law			
the	char ent ù	nge or changes are made, the Florida street address of trill be identical. Or, in the case of a Florida limited lial re authorized by an affirmative vote of the members of	the register bility com	tered office and the business office of the registered mpany, it is hereby confirmed that the change(s)	
the	arti	cles of organization or the operating agreement of the l	imited liab	ability company.	
		May Mal		Michael Moesch	
	_	ure of a member or authorized representative of a member		Printed or typed name of signee	
pro the to t	ovisio obli nere	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have been also this change.	ee to act in performand for in Chi ereby conf	in this capacity. I further agree to comply with the ince of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed infirm that the limited liability company has been	
Sig	natur	e of Registered Agent			