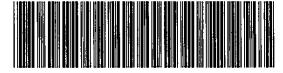


(Requestor's Name)						
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☐ PICK-UP	☐ WAIT	MAIL				
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Certified Copies	_ Certificates	of Status				
Special Instructions to I	Filing Officer					
Special Instructions to Filing Officer:						





- 04/13/18--01031--002 **25.00



COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	ECT: LT&W, LLC					
Name of Limited Liability Company						
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.				
Please	return all correspondence concerning the	nis matter to the following:				
	Todd Redmond Name of Person	·				
	LT * W, LLC					
	Firm/Company					
23	35 Timbercrest Circle	e South				
(Clearwater, FL 33743 City/State and Zip Code	3				
 	FREDMONDO hardexerase E-mail address: (to be used for future and	works.com nual report notification)				
For fu	rther information concerning this matter	, please call:				
	Todd Redmond	_at(<u>727</u>) 710-5312				
	Name of Person	Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: 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				

INHS18 (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. Na	me of the limited liability company:	LC		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited (Note: MAY BE POST	
	2335 Timbercrest Circle South	_	2335 Timbercrest	Circle South
	Clearwater, FL 38743	_	Clearwater, FL 33	3743
	3/08/2017		L17000053853	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Toda Registered Office shown on the records of the	e Florida l	Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET A)			
	2335 Timbercrest Circle Wes	+		1 S
	<u>Clearwater</u> , FL	337	<u>143</u>	
(b)	Todd Redmond Enter name of NEW Registered Agent and/or NEW Registered Co	Office add	SET C	APR 13
	Enter that of the trace of the	onice add	FLORID	ED PH :: L
	NEW Registered Office Address:			● %
	2335 Timbercrest Circle Sou	ith		
	<u>Clearwater</u> , FL	3371	<u>υ3</u>	
the cha agent w was/we	mited liability company is not organized under the lawinge or changes are made, the Florida street address of tivill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of organization or the operating agreement of the liability and or the liability and or the operating agreement of the liability and or the liability and or the operating agreement of the liability and or th	he regist pility cor the limi	tered office and the business off mpany, it is hereby confirmed th ited liability company or as othe	fice of the registered nat the change(s)
····	AM		Todd Redmo	ond
•	ure of a member or authorized representative of a member		• •	
provision the obli to mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change	e to act i performa for in C ereby co	in this capacity. I further agree ince of my duties, and I am fami hapter 605, F.S. Or, if this doctorism that the limited liability co	to comply with the liar with and accept ument is being filed ompany has been
Signatur	re of Registered Agent			