L17000060783

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



700327223017

04/09/19--01004--021 **25.00

APR 0 8 2019



RARDICHS

APR 13 2019
I ALBRITTON

COVER LETTER

TO: Registration Section Division of Corporations	•	
SUBJECT: TOP Notch Signa-	twes d 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:		
Jason BoHon Name of Person		
Top Notch Signature	atures	
Too W. Virginia St. Apt 529 Address		
Tallshassee FL 32304 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Jason BoHon at (56	1 , 212-2474 Area Code & Daytime Telephone Number	
Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314	
Enclosed is a check for the following 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.

Florida.
1. Name of the limited liability company: Top Notch Sign 9+4125, LLC
2. (a) TOO W. D. 15, n. 9 S. Apt 529 (b) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
700 W. Urging St Apt 529 700 U. Wrigh st. Apt 52
Tallahassec, FL 32304 Tallahasee, FL 32304
Date of filing/registration in Florida 4. Document number
5. (a) Un ted Stetes Corporation Agents inc. Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
13367 Winding Oak Court Tampa, FC 55612 Registered Office Address (MUST BE) FLORIDA STREET ADDRESS)
13302 Winding Oak Court
Tampa .FL 33612
(b) JGSOO Bo HOO Enter name of NEW Registered Agent and/or NEW Registered Office address:
700 West Diginis St.
Apt 529
Tallahassee Fr. 32304
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.
Signature of a member or authorized representative of a member Signature of a member of a member of signee
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.

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

nature of Registered Agent