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## COVER LETTER

TO: Registration Section Division of Corporations		
Intrepid Law. LLC		
	ne of Limited Liability Company	<del></del>
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
Adam L. Tucker, Esq.		
Name of Person	<del></del>	
Intrepid Law		
Firm/Company	·- <del></del>	
10752 Deerwood Park Blvd Suite 100		7-73. 1-14
Address		ACA 19172
Jacksonville, Florida 32256		- NA - 1
City/State and Zip Code		⊙
adam@intrepidlaw.com		 :00
E-mail address: (to be used for future and	nual report notification)	<b>.</b>
For further information concerning this matter,	, please call:	
Adam L. Tucker	904 829-7039	
Name of Person	Area Code & Daytime Telephone Nur	nber
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	gamount:	
월-\$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. Name	of the limited liability company: Intrepid Law, I	LLC
2. (a) <u>I</u> ntr	epid Law	_ (b) Intrepid Law
( <del></del> )	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
10	752 Deerwood Park Blvd Suite 100	10752 Deerwood Park Blvd Suite 100
Ja	cksonville, Florida 32256	Jacksonville, Florida 32256
03/		L17000063416
5. —	Date of filing/registration in Florida	4. Document number
. (a) Tu	cker, Adam L.	
Regi	istered Agent and Registered Office shown on the records of to	the Florida Dept. of State:
	istered Office Address (MUST BE FLORIDA STREET A	ADDRESS)
_	948 3rd St S #108	1DDRESS)
 Ja	cksonville Beach FL	32250
	, , , , ,	
(b)	am L. Tucker  r name of NEW Registered Agent and/or NEW Registered	
1,1110	a name of M. W Registered Agent and of MAN Registered	CO
Ac	lam L. Tucker	
NE.	W Registered Office Address.	<del></del>
10	752 Deerwood Park Blvd Suite 100	
Ja	cksonville FI	32256
the change tgent will b was/were a the articles	or changes are made, the Florida street address of se identical. Or, in the case of a Florida limited lia	vs of the State of Florida, it is hereby confirmed that after the registered office and the business office of the register ability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in limited liability company.  Adam L. Tucker  Printed or typed name of signee
~	•	ee to act in this capacity. I further agree to comply with th
provisións the obligati to merely r	scept the appointment as registered agent and agr of all statutes relative to the proper and complete ions of my position as registered agent as provided effect a change in the registered office address, I I writing of this change	ee to act in this capacity. I further agree to comply with in performance of my duties, and I am familiar with and acce of for in Chapter 605, F.S. Or, if this document is being file hereby confirm that the limited liability company has been
	Registered Agent	