117000083582

(F	Requestor's Name)	
(A	Address)	
	\ddress)	
(C	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(0	Occument Number)	
Certified Copies	Certificates of \$	Status
Special Instructions to	o Filing Officer:	

Office Use Only



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C. GOLDEN FEB 1 4 2020



2804 Gateway Oaks Drive #100 Sacramento, CA 95833 Phone (800)533-7272 Fax (800)603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

NUMBER PAGES:

REFERENCE:

Cori Ann Crosthwaite

1276004

Date: January 13, 2020

Registration Section Division of

Corporations

CLIFTON BUILDING

2661 EXECUTIVE CENTER CIRCLE

TALLAHASSEE, FL 32301

FAX:

TO:

PLEASE PERFORM THE FOLLOWING:

COFFIELDS SALES/ESTATE SALES LLC

Change of Registered Agent

IN: FL

SPECIAL INSTRUCTIONS:

PLEASE RETURN: Regular Mail

PLEASE CALL (800)533-7272 ATTN: Cori Ann Crosthwaite TO CONFIRM FILING RESULTS

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #100 SACRAMENTO, CA 95833

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET (800)533-7272

H1039

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.

Name of the limited liability company:	COFFIELD	S SALE	S/ESTATE SALES LLC	
a) 8326 PUNJOB RD		_ (b)		
Principal office address of limited li (Note: MUST BE STREET)			Mailing address of limited liability com (Note: MAY BE POST OFFICE BO	
MILTON, FL 32583				
04/13/2017		 L170	000083582	
Date of filing/registration in	Florida	4.	Document number	-
LEGALINC CORPORATE SEI	RVICES INC.			
a) Registered Agent and Registered Office show	vn on the records of the	Florida Dept.	of State:	7
5237 SUMMERLIN COMMON	IS BLVD STE 40	00		070
Registered Office Address (MUST BE FI	ORIDA STREET ADI	DRESS)		91: 42 9727
FORT MYERO				6
FORT MYERS	, _{FL} _33			7
ROCKET LAWYER CORPOR	ATE SERVICES	LLC		с'n
Enter name of NEW Registered Agent and/or	r NEW Registered Offi	ice address:		20
155 OFFICE PLAZA DRIVE, 1	ST FLOOR			
NEW Registered Office Address:				
TALLALIACOFF	200	201	· · ·	
TALLAHASSEE	, FL_323			
limited liability company is not organize ange or changes are made, the Florida st will be identical. Or, in the case of a Florida st ere authorized by an affirmative vote of icles of organization or the operating agriculture.	reet address of the a orida limited liabilit the members of the reement of the limit	registered of y company, limited liab	ffice and the business office of the regis it is hereby confirmed that the change(pility company or as otherwise provided company.	sten s)
hure of a member or authorized representative of			Printed or typed name of signee	
by accept the appointment as registered ons of all statutes relative to the proper igations of my position as registered agily reflect a change in the registered office writing of this change.	and complete perjo ent as provided for ice address, I hereb	act in this commance of n in Chapter (y confirm th	capacity. I further agree to comply with my duttes, and I am familiar with and ac 505, F.S. Or, if this document is being j act the limited liability company has bee	thiccej filed en