To: Page 2 of 4	2017-06-09 13:22:48 CDT 132338	93150 From: Christian Gamboa
6/9/2017	Division of Corporations	
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	Note: Please print this page and use it as a cover sheet. Type the fax audit is (shown below) on the top and bottom of all pages of the document.	number
	((([H17000155475 3)))	
	Note: DO NOT hit the REFRESH/RELOAD button on your browser from the Doing so will generate another cover sheet.	s page.
	To: Division of Corporations Fax Number : (850)617-6383	62
	From: Account Name : LEGALZOOM.COM INC. Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)962-3889	23
	**Enter the email address for this business entity to be used for the annual report mailings. Enter only one email address pleas	
26	LLC REGISTERED AGENT CHANGE	۶۹ ۲
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Page 3 of 4	2017-06-09 13.22:48 CDT	13233893150 From: Christian Gam
ı	¢ COVER4LETTER	
TO: Registration Section		
Division of Corporations		
SUBJECT:	, LLC	
	Name of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registere	d Office Change and fee(s) are submitte	d for filing.
Please return all correspondence concerni	ng this matter to the following:	
Cheyenne Moseley		
Name of Person		ŧ
Legalzoom.com, Inc.		<b>2017</b>
Firm/Company		
101 N. Brand Blvd., 11th Floor		SSS SSS
Address	<u></u>	(hanna)
Glendale, CA 91203		
City/State and Zip C	ode	
mcarlisle@lislesalesgroup.com		
E-mail address: (to be used for future	re annual report notification)	
For further information concerning this m	natter, please call:	
Cheyenne Moseley	800 773-0888 ex	tt 9724
Name of Person		
STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	S: MAILING ADDRES Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, Florida 33	ons
Enclosed is a check for the follo	wing amount:	
\$25 Filing Fee	2 \$55 Filing Fee & Cer	tified Copy
INTIS18 (2/14)	-	

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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.

. Na	me of the limited liability company: LISLE SALES	GROUP,		
t. (a)	5703 Red Bug Lake Rd. (b) 5703 Red Bug			Red Bug Lake Rd.
	Frincipal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of Emited finbility company: (Note: MAY BE POST ()FFICE II()X)
	#524	#5	24	·
	Winter Springs, FL 32708	Winter Springs, FL 32708		
	04/17/2017	L17	0000	086570
•	Date of filing/registration in Florida	4,		Document number
(ຄ)	United States Corporation Agents, Inc			
	Registered Agent and Registered Office shown on the records of th 13302 Winding Oaks Court	ne Florida Dept	, of Su	ai¢:
	Registered Office Address (MUST 16 FLORIDA STREET A. Suite A	<u>DDRESSI</u>		
	Tampa	33612		2817 SEC
(b)	United States Corporation Agents, Inc. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : 13302 Winding Oak Court			
	NEW Registered Office Atdress			
	Suite A			
,	Tampa, FL	33612 <sup>45</sup>	5	A D OO
he chi gent v vas/w	imited liability company is not organized under the law inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the registered bility compa the limited imited liabil	d offic ny, it Nabili ity co	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
Signa	ture of a member or purificitized representative of a member			Printed or typed name of signee
l here vovisi he obl o mer otlfie	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete p ignitions of my position as registered agent as provided ety reflect a change in the registered office address, The d in writing of this change. Corpuration Agents, Inc.	te to act in the performance for in Chap archy confirm tary on bohalf of	his cay of ny ter 60 m tha fUnited	pacity. I further agree to comply with the y duties, and I am familiar with and accept DS, F.S. Or, if this document is being filed t the limited liability company has been is status
รัญกาลไม	re of Registered Ageni			

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

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