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To:

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone

Fax Number : (855)330-1010

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## LLC REGISTERED AGENT CHANGE CORDARRA'S PAINTING CONCEPTS LLC

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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.

| r to, rac              |   | AIC D                                 | AINTING   | CONCEPTS LLC   |   |                 |
|------------------------|---|---------------------------------------|---|--|---|-----------------|
| 1. Na                  | me of the limited liability company:  |                                       |   | <del></del>  |   |                 |
| 2. (a)                 | 5218 Stacy street   | (                                     | <sub>b)</sub> <u>5218 St</u>                        | acy street   |   |                 |
|                        | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)   |                                       | M   | ailing address of limited liable (Note: MAY BE POST OF a |   | y:              |
|                        | 13  |                                       | 13  |  | . <u>.</u>                              |                 |
|                        | WEST PALM BEACH, FL 33417   |                                       | WEST PA   | ALM BEACH, FL 33   | 417                                     |                 |
|                        | 04/19/17  |                                       | L170000   | 87499  |   |                 |
| 3.                     | Date of filing/registration in Florida  | 4.                                    |   | Document number  |   |                 |
| 5 (1)                  | Cordarra Lee Bostic   |                                       |   |  |   |                 |
| 5. (a)                 | Registered Agent and Registered Office shown on the records of  | the Floric                            | a Dept. of State:                                   |  |   |                 |
|                        | 5218 Stacy street   |                                       |   |  |   |                 |
|                        | Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  |                                       |   |  |   |                 |
|                        | 13  |                                       |   |  |   |                 |
|                        | WEST PALM BEACH   | 3341                                  | 7   |  | ,-                                      | 2021            |
| (b)                    | Registered Agents Inc.  |                                       |   |  | = | APR 2           |
| (0)                    | Enter name of NEW Registered Agent and/or NEW Registered  | d Office a                            | ddress:   |  |   | 27              |
|                        | 7901 4th St N   |                                       |   |  | 34.<br>7.0<br>3.7                       | <u> </u>        |
|                        | NEW Registered Office Address:  |                                       |   |  | 5.                                      | 1:42            |
|                        | STE 300   |                                       |   |  |   |                 |
|                        | St. Petersburg  | . <b>33</b> 70                        | 2   |  |   |                 |
| the cha<br>agent was/w | limited liability company is not organized under the la<br>ange or changes are made, the Florida street address o<br>will be identical. Or, in the case of a Florida limited I<br>ere authorized by an affirmative vote of the members<br>icles of organization or the operating agreement of the | f the reg<br>iability of<br>of the li | astered office<br>company, it is<br>mited liability | hereby confirmed that it company or as otherwi           | of the reg<br>the change                | istered<br>E(s) |
| T2: 1                  |   |                                       | ley Park  |  |   |                 |
| Signa                  | ature of a member or authorized representative of a member  |                                       |   | Printed or typed name of sig                             | nee                                     |                 |

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.

Bill Havre - Assistant Secretary

Signature of Registered Agent