L17000127883

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





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11/02/17--01026--013 **25.00

2011 NOV -2 AN 10: 21

NOV O ? 2M7 J. HARRIS

. COVER LETTER

Division of Corporations								
Everyday Hearing LLC SUBJECT:								
Name of Limited Liability Company								
Dear Sir or Madam:								
The enclosed Registered Agent/Registered Office Cha	nge and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter	r to the following:							
Wesley Banks								
Name of Person								
Everyday Hearing LLC								
Firm/Company								
5918 99th St E								
Address								
Bradenton/FL/34202								
City/State and Zip Code								
onepace.banks@gmail.com								
E-mail address: (to be used for future annual repo	ort notification)							
For further information concerning this matter, please	call:							
Wesley Banks	705-9699							
Name of Person	Area Code & Daytime Telephone Number							
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 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.

I. No	ame of the limited liability company: Everyday He	aring	LL	0				
2. (a)	5918 99th St E		(b) 5918 99th St E					
, (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-)		Mailing address			
	Bradenton, FL 34202	·		Braden	ton, FL 342	02		
	03/20/2013		i	.170001	127883			
3.	Date of filing/registration in Florida	4.	_		Document r	umber		
5. (a)	Wesley Banks							
(-)	Registered Agent and Registered Office shown on the records o 7301 19th Ave W	f the Flor	ida	Dept. of Sta	ate:			
	Registered Office Address (MUST BE FLORIDA STREET	`ADDRE	:SS)					
				<u>,, , , , , , , , , , , , , , , , , , ,</u>		·	2017	
	Bradenton	3420	9			•	ASH 1182	\$.
	Manager Danie	<u>-</u>	-				-2	स्थान इंग्लिक्टन इं
(b)	Wesley Banks	1.0.00				. •	Ē	•
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office	add	ress:			<u> </u>	
	5918 99th St E						2	
	NEW Registered Office Address:	<u>-</u>			·· ·			
	Bradenton	 L3420)2		_			
the cha agent v was/w	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the re liability of the l e limite	gis co imi d li	ered office npany, it ted liabili	ce and the bus is hereby con ity company ompany.	iness o firmed	office o that th	f the registered e change(s)
Signa	ture of a member or authorized representative of a member				Printed or typ	ed name	of signe	ee -
provisi the obi to mer notified	by accept the appointment as registered agent and as constant of all statutes relative to the proper and complete ligations of my position as registered agent as provided by replective change in the registered office address, and in writing of this change.	gree to de perfoi ed for it hereby	act rma n C	in this ca nce of my hapter 60 nfirm tha	pacity. I furth y duties, and I 95, F.S. Or, if t the limited li	ier agre am fan this do ability	ee to co niliar v cumen compa	omply with the with and accept it is being filed iny has been
V	Division of Corporations P.O.	D (1		- M H L	FI 222	• 4		

FILING FEE: \$25.00