

L17000185686

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900312037239

04/20/18--01011--022 \*\*25.00

SECRETARY OF STATE  
FILING SERVICES  
DIVISION

2018 APR 20 AM 9:30

FILED

APR 23 2018  
J. HARRIS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Live Oak Storage Group LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeremiah Carlson

Name of Person

Live Oak Storage Group LLC

Firm/Company

7860 Gate Parkway #106

Address

Jacksonville FL 32256

City/State and Zip Code

dr.carlson@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeremiah Carlson at ( 904 ) 382-6763

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  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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: Live Oak Storage Group LLC

2. (a) 7860 Gate Parkway #106 (b) 7860 Gate Parkway #106

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

Jacksonville FL 32256

Jacksonville FL 32256

08/30/2017

L17000185686

3. Date of filing/registration in Florida 4. Document number

5. (a) HETSLER MEDIATION & VALUATION INC.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

10151 DEERWOOD PARK BLVDBLD 200 STE 250

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Jacksonville, FL 32256

(b) Jeremiah Carlson

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

7860 Gate Parkway #106

**NEW** Registered Office Address:

Jacksonville, FL 32256

FILED  
2010 APR 20 AM 9:30  
STATE  
MILWAUKEE COUNTY

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Jeremiah Carlson

Printed or typed name of signee

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.

Signature of Registered Agent