

(Requestor's Name)			
(Ad	dress)		
(Address)			
<b>(</b>	<b>,</b>		
(6)	701 1 57: 151		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
,	•	,	
	cument Number)		
(DC	cument Number)		
Certified Copies Certificates of Status			
Special Instructions to	Filina Officer:		
• • • • • • • • • • • • • • • • • • • •	<b>g</b>		
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Office Use Only



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## **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT:	FENIX PAINTING & CONSTRUCTION LLC			
Name of Limited Liability Company				
Dear Sir or N	Madam:			
The enclosed	d Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to the following:		
Nersy Del	Rio Sirit Rovero			
	Name of Person			
	Firm/Company			
3750 Silve	r Bluff Blvd Apt 407			
-	Address			
Orange Pa	ark FI 32065			
	City/State and Zip Code			
nersysirit@	gmail.com			
E-mail	address: (to be used for future ann	ual report notification)		
For further in	nformation concerning this matter,	please call:		
Nersy Sirit	Rovero	904 6749083		
	Name of Person	Area Code & Daytime Telephone Number		
Regi Divi: Clift 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle shassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Encl	osed is a check for the following	amount:		
<b>☑</b> \$2	25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FO LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compasubmits the following statement in order to change its registered office or registered agent, or both, in the State Florida

L Na	mme of the limited liability company: FENIX PAIN	TING & CONSTR	UCTION LLC
2. (a)	, ,	(b)	
2. (a)	Principal office address of limited liability company:		Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) 3750 Silver Bluff Blvd Apt 407	3750 Silv	( <u>Note: MAY BE POST OFFICE BON</u> ) ver Bluff Blvd Apt 407
	Orange Park FI 32065	<del></del>	Park FI 32065
	Orange Park 1132003		
	09/01/2017	L1700018	37091
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Allegiant Accounting Group LLC		
J. (4)	Registered Agent and Registered Office shown on the records o	f the Florida Dept. of State	- ::
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	5411 Shady Pine St S		
	Jacksonville F	L <sup>32244</sup>	
	Marcy Dal Rio Sirit Payara		<del>-</del> -4
(b)	Nersy Del Rio Sirit Rovero  Enter name of NEW Registered Agent and/or NEW Registere	d Office address:	<b>204:</b> \$50 A15
	Tanter name of NEW Registered Agent and/or NEW Registere	d Office address.	ZOJ9 AUG SECKELLA
	_		30
	NEW Registered Office Address:		71, ·
	3750 Silver Bluff Blvd Apt 407		
		00005	: 55
	Orange Park F	L <u>32065</u>	•
the cha agent was/w	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative yote of the members icles of organization of the operating agreement of the	of the registered office liability company, it is of the limited liability of limited liability con	e and the business office of the register is hereby confirmed that the change(s) y company or as otherwise provided in
_	ture of a member or authorized representative of a member		Printed or typed name of signee
provis. the obt to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I din writing of this change.	e performance of my ( led for in Chapter 605	duties, and I am familiar with and acc S.F.S. Or if this document is being fil
Signati	ire of Registered Agent		

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 F1LING FEE: \$25.00

INHS18 (2/14):