

U7000194819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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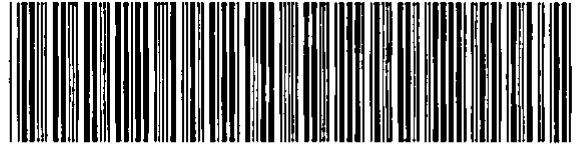
(Business Entity Name)

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FEB 20 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CMA Insurance Consulting, 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:

Carol Ashman

Name of Person

CMA Insurance Consulting, LLC

Firm Company

133 Pompano Dr SE

Address

Saint Petersburg FL 33705

City/State and Zip Code

carolm1217@msn.com

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

For further information concerning this matter, please call:

Carol Ashman

443

786-7959

at (_____) _____

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: CMA Insurance Consulting, LLC

2. (a) 133 Pompano Dr SE
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Saint Petersburg FL 33705

(b) 133 Pompano Dr SE
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

Saint Petersburg FL 33705

3. 09/19/2017 Date of filing/registration in Florida

4. L17000194819 Document number

5. (a) Blanchard Insurance, Inc.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
999 Douglas Ave
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Suite 3318
Altamonte Springs, FL 32714

(b) Carol Ashman
Enter name of NEW Registered Agent and/or NEW Registered Office address:
133 Pompano Dr SE
NEW Registered Office Address:
Saint Petersburg, FL 33705

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2019 FEB 15 AM 11:57
STATE
TALLAHASSEE, FL

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.

Carol Ashman

Signature of a member or authorized representative of a member

Carol Ashman

Printed or typed name of signer

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.

Carol Ashman

Signature of Registered Agent



InsureSign Document Completion Certificate

Document Reference : 292051f9-6c1b-4a3d-88ea-bebaa4687bf911422
Document Title : Carol Ashman LLC REG AGT END
Document Region : Northern Virginia
Sender Name : Michael Tonsetic
Sender Email : mike@blanchardinsurance.com
Total Document Pages : 2
Secondary Security : Not Required
Participants

1. Carol Ashman (carolm1217@msn.com)

Document History

Timestamp	Description
02/10/2019 19:57PM UTC	Document sent by Michael Tonsetic (mike@blanchardinsurance.com).
02/10/2019 19:57PM UTC	Email sent to Carol Ashman (carolm1217@msn.com).
02/10/2019 19:57PM UTC	Email sent to Michael Tonsetic (mike@blanchardinsurance.com).
02/11/2019 00:11AM UTC	Document viewed by Carol Ashman (carolm1217@msn.com). 70.126.215.195 Mozilla/5.0 (Linux; Android 8.0.0; SAMSUNG SM-G955U Build/R16NW) AppleWebKit/537.36 (KHTML, like Gecko) SamsungBrowser/8.2 Chrome/63.0.3239.111 Mobile Safari/537.36
02/11/2019 00:12AM UTC	Carol Ashman (carolm1217@msn.com) has agreed to terms of service and to do business electronically with Michael Tonsetic (mike@blanchardinsurance.com). 70.126.215.195 Mozilla/5.0 (Linux; Android 8.0.0; SAMSUNG SM-G955U Build/R16NW) AppleWebKit/537.36 (KHTML, like Gecko) SamsungBrowser/8.2 Chrome/63.0.3239.111 Mobile Safari/537.36
02/11/2019 00:12AM UTC	Signed by Carol Ashman (carolm1217@msn.com). 70.126.215.195 Mozilla/5.0 (Linux; Android 8.0.0; SAMSUNG SM-G955U Build/R16NW) AppleWebKit/537.36 (KHTML, like Gecko) SamsungBrowser/8.2 Chrome/63.0.3239.111 Mobile Safari/537.36
02/11/2019 00:12AM UTC	Document copy sent to Carol Ashman (carolm1217@msn.com).