

L17000 197634

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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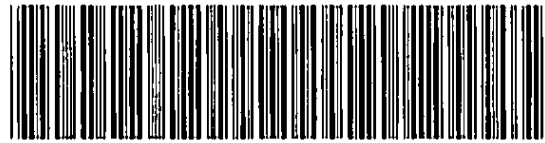
(Business Entity Name)

(Document Number)

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MAY 06 2020  
ALBRITTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Rally Drywall, Texturing & More, 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:

Alyssa Fulton  
Name of Person  
Rally Drywall, Texturing & More, LLC  
Firm/Company  
11757 216th Ter  
Address  
O'Brien, Fl 32071  
City/State and Zip Code

rallydrywallllc@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ronald Fulton at ( 386 ) 697-6558  
Name of Person Area Code & Daytime Telephone Number

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

- \$25 Filing Fee                       \$55 Filing Fee & Certified Copy

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2020 MAY -14 PM 2:30



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 23, 2020

2020 MAY -4 PM 12: 28

ALYSSA FULTON  
11757 216TH TER  
O'BRIEN, FL 32071

SUBJECT: RALLY DRYWALL, TEXTURING & MORE, LLC  
Ref. Number: L17000197634

We have received your document for RALLY DRYWALL, TEXTURING & MORE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 320A00008528

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

**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: Rally Drywall, Texturing & More, LLC

2. (a) 11757 216th Ter O'brien, Fl 32071 (b) 11757 216th Ter O'brien, Fl 32071  
 Principal office address of limited liability company: Mailing address of limited liability company:  
 (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 09/25/2017 4. L17000197634  
 Date of filing/registration in Florida Document number

5. (a) Ronald C Fulton  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
11757 216th Ter O'brien, Fl 32071

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
11757 216th Ter  
O'Brien, FL 32071

2020 MAY -4 PM 2:30  
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(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  
Alyssa Fulton  
NEW Registered Office Address:  
11757 216th Ter  
O'Brien, FL 32071

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.

Alyssa Fulton  
 Signature of a member or authorized representative of a member

Alyssa Fulton  
 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.

Alyssa Fulton  
 Signature of Registered Agent