2/21/2019

3239628300 From Meghan S

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	TAMING:	so will generate a		2 2
To:				0:1
,	Division of Co	rporations		
	Fax Number	: (850)617-638	3	بـ <u></u>
From:				音示 二
	Account Name	: LEGALZOOM.CO	M INC.	
	Account Number	120010000062	!	
	Phone	: (323)962-860	10	
	Fax Number	: (323)962-388	9	
**Enton	the email addres	s for this busi	ness entity to be	used for future

LLC REGISTERED AGENT CHANGE SHUTTLESLIDE LLC

Certificate of Status	0
Certified Copy	
Page Count	03
Estimated Charge	\$55,00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section Division of Corporations								
SUBJECT: SHUTTLESLIDE LLC								
N N	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:							
Cheyenne Moseley	this matter to the following: ALL AHAMASSEL TORRES A THE ORDER A TH							
Name of Person	21							
Legaizoom.com, Inc.								
Firm/Company								
101 N. Brand Blvd., 10th Floor								
Address								
Glendale, CA 91203								
City/State and Zip Code	c							
russ.taylor@shuttleslide.com								
E-mail address: (to be used for future	annual report notification)							
For further information concerning this matter	ter, please call:							
Cheyenne Moseley	800 773-0888 ext 9724							
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 follow	ing amount:							
□ \$25 Filing Fee	S55 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

1. N	ame of the limited liability company: SHUTTLESL	IDE LL	.C	_		
(u)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	_ ((b) Mushing address of limited hability company (Note: MAY BE POST OFFICE BOX)			
	13305 ROSELAND RD. #562	13305 ROSELAND RD. #562				
	ROSELAND, FL 32957	ROSELAND, FL 32957				
	11/02/2017		L1700022	7065	-i -a	
3.	Date of filing/registration in Florida	4		Document		-17
5. (a)	Registered Agent and Registered Office shown on the records of the WIDERMAN MALEK, PL	he Florid	a Dept of State		21 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Γ7
	Registered Office Address (MUST BE FLORIDA STREET A				A 7 11	U
	MELBOURNE FI.	32904				
						1 .
(b)	Enter name of NEW Registered Agent and/or NEW Registered UNITED STATES CORPORATION AGENT				*·	
	NEW Registéred Office Address		<u></u>			
	13302 WINDING OAK COURT, SUITE A	<u> </u>				
	TAMPA,FL	33612	! 			
the chagent	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liawere authorized by an affirmative vote of the members of the organization or the operating agreement of the	the reginability confitted	istered office ompany, it is nited liability	and the but hereby con company pany	siness office of the clarific	ie registered hange(s)
Sign	ature of a member or authorized representative of a member				ped name of signee	
provis the ob- to me	eby accept the appointment as registered agent and agrisions of all statutes relative to the proper and complete digations of my position as registered agent as provided rely reflect a change in the registered office address, I led in writing of this change CHEYENNE MOSELEY, ASSISTANT SECRETAR STATES CORPORATION AGENTS, INC	perjorn d for in hereby c	nance of my a Chapter 605, confirm that t	ncity I furt duties, and FS Or, i the limited	ther agree to com I am familiar with I this document is Itability company	nly with the 1 and accept 2 being filed has been

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

Signature of Registered Agent