

L17000254158

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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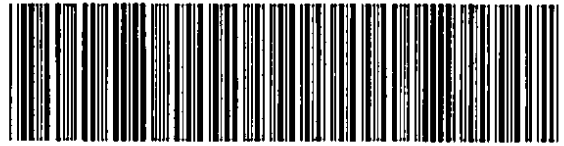
(Business Entity Name)

(Document Number)

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2020 JUN 29 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FL

D BRUCE
AUG 15 2020

COVER LETTER

Registration Section
Division of Corporations

SUBJECT: REMYFORD LOWGRAIN LEASING, 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:

Wesley T. Dunaway, Esq.

Name of Person

Kovar Law Group

Firm/Company

618 E. South St., Ste. 500

Address

Orlando, FL 32801

City/State and Zip Code

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

For further information concerning this matter, please call:

Wesley T. Dunaway

407

603-6652

at ()

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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TALLAHASSEE, FL

**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: REMYFORD LOWGRAIN LEASING, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

12/12/2017 L17000254158

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

5. (a) THE BULLWART LAW GROUP
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

15167 US 331 Business Route

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Ste. H

Freeport, FL 32439

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Kovar Law Group

NEW Registered Office Address:

618 E. South St., Ste. 500

Orlando, FL 32801

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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.

Kristopher M Retherford
Kristopher M Retherford (Law 26, 2020 11:54 (CD))

Signature of a member or authorized representative of a member

Kris Retherford o/b/o LEENDORF MAJOR HOLDING CO.

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.

Wes Dunsaw

Signature of Registered Agent

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