L170000255116

(Requestor's Name)		
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PICK-UP WAIT MAIL		
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01/02/18--01032--011 **25.00

J. HARRIS

COVER LETTER

TO: Registration Section

Division of Corporations		
SUBJECT: C.E. HATHA Name of Limit	ed 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:		
ERIC L HATHAWA Name of Person	<u>Y</u>	
C.E. HATHAWAY LLC		
Firm/Company		
2317 SPENCEE PL	- · -	
Address	•	
LAKELAND, F/. 33	801	
City/State and Zip Code		
PADAFISO @ GMail. Com		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Charling Hathaway at 320, 455-2106		
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	
INHS18 (2/14)		

STÄTEMENT 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.

7	1/ -12 111 11
1. Name of the limited liability company:	HATHAWAY LLC
2. (a) 2317 SPENCER 7L.	(b) 2317 SPENCER PL
Principal office address of limited liability company:	Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS)	(Note: MAY BE POST OFFICE BOX)
LAKKLAND Fl. 33501	LAKELAND, F/. 3380/
DEC. 14-2017	L17000 255116
3. Date of filing/registration in Florida	4. Document number
5. (a) ERIC L HATHAW	AY
Registered Agent and Registered Office shown on the records of	
7722 TOPAY L	N
Registered Office Address (MUST BE FLORIDA STREET)	<u> </u>
	_
PORT Richey FL (b) TEACY M HATH	34688
	2011
(b) TRACY ME HATKI	AWAY
Enter name of NEW Registered Agent and/or NEW Registered	
7722 TOPAY LA	<u>/</u>
NEW Registered Office Address:	
PORT Richary, FI	34688
/	
If the limited liability company is not organized under the la	ws of the State of Florida, it is hereby confirmed that after f the registered office and the business office of the registered
agent will be identical. Or, in the case of a Florida limited li	iability company, it is hereby confirmed that the change(s)
was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the	
the articles of organization of the operating agreement of the	
Signature of a member or authorized representative of a member	Ecre L Hathorway Printed or typed name of signee
•	
provisions of all statutes relative to the proper and complete	ree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept
the obligations of my position as registered agent as provide to merely reflect a change in the registered office address, I	e performance of my duties, and I am familiar with and accept ed for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been
notified in writing of this change.	
Signature of Registered Agent	
- · G · · · · · · · · · · · · · · · · ·	

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

INHS18 (2/14)