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(Requestor's Name) (Address) (Address)	900314730789
(City/State/Zip/Phone #)	「読み習み」が、「行い」では、「「「」」を入っていた。
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Office Use Only	

4/8/19/25

# William A. Jordan

2325 Ashford Court | Dunedin FL 34698 | 603-566-3804 | plumb-loco@hotmail.com

#### 04/02/2019

Registration Section Division of Corporations

RE: change of registered agent and address

Dear Sir or Madam:

Enclosed is a resubmittal of a change notice originally sent 6/22/2018. The original gocument referenced an *incorrect* Document number of L18000135545. A check for \$25.00 was submitted (copy attached) to cover the cost of registering the change. According to your office, this amount is now sitting as a credit under the incorrect corporation (Shore Corporation?). Will you please make the corrections outlined on the form enclosed and apply the credit to the cost of the filing fee. The *correct* Document number is L1800023112.

Your prompt assistance is appreciated since legal documents are being held in suspension until these changes are made.

Please call me at the number above to clear up any possible confusion.

Sincerely, liam A. Jordar



#### **TO:** Registration Section Division of Corporations

# SUBJECT: 2325 ASHFORD CT INVESTMENT, 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:

WILLIAM A. JORDAN

Name of Person

Firm/Company

#### 2325 ASHFORD COURT

Address

DUNEDIN FL 34698

City/State and Zip Code

## PLUMB-LOCO@HOTMAIL.COM

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

For further information concerning this matter, please call:

WILLIAM JORDAN	603 566-3804
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following	ng amount:
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy

6162 ALUAHASSEL.F HIG 5- 44 FED 2

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.

) Principal office address of limited liability company:	(b) Mailing address of limited liability company:
( <u>Note: MUST BE STREET ADDRESS</u> )	(Note: MAY BE POST OFFICE BOX)
2325 ASHFORD COURT	2325 ASHFORD COURT
DUNEDIN, FL 34698	DUNEDIN, FL 34698
	L18000023112
Date of filing/registration in Florida	4. Document number
a)	「花は、「」
a) Registered Agent and Registered Office shown on the records DAVID FOSTER	ET ADDRESS)
Registered Office Address (MUST BE FLORIDA STREE	
130 40TH AVE SE	
ST PETERSBURG	FI. 33705
	· · · · · · · · · · · · · · · · · · ·
)	
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registe</u>	red Office address:
WILLIAM JORDAN	
NEW Registered Office Address:	· · · · · · · · · · · · · · · · · · ·
2325 ASHFORD COURT	
DUNEDIN	F1, 34698
hange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited	laws of the State of Florida, it is hereby confirmed that after of the registered office and the business office of the registe l liability company, it is hereby confirmed that the change(s) rs of the limited liability company or as otherwise provided i the limited liability company.

Thereby 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.

fire orter Registered Agent Signature/c

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