

L18000031890

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

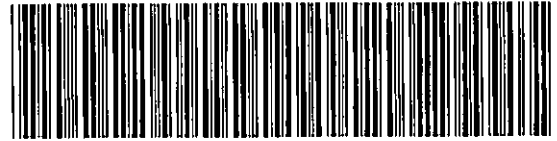
(Business Entity Name)

(Document Number)

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J. I. EGGETT
JUN 20 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 4, 2018

ERICCA GARRISON
2221 GATOR CREEK RANCH RD
LAKELAND, FL 33809 US

SUBJECT: GARRISON CONSULTING FIRM, LLC
Ref. Number: L18000031890

We have received your document for GARRISON CONSULTING FIRM, 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):

The registered agent must sign accepting the designation.

As indicated on the form, the RA still needs to sign confirming the address change.

Please return the corrected original and one copy of 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) 245-6051.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 318A00011518

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SEVENTH FLOOR
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GARRISON CONSULTING FIRM

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:

ERICCA GARRISON

Name of Person

GARRISON CONSULTING FIRM

Firm/Company

2221 GATOR CREEK RANCH RD

Address

LAKELAND, FL 33809

City/State and Zip Code

GARRISON@ROOT98WAREHOUSE.COM

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

For further information concerning this matter, please call:

ERICCA GARRISON

Name of Person

at (813) 659-6574

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

**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: GARRISON CONSULTING FIRM
2. (a) GARRISON CONSULTING FIRM
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
2904 CHUKKAR COURT
PLANT CITY, FL 33566
- (b) GARRISON CONSULTING FIRM
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
2904 CHUKKAR COURT
PLANT CITY, FL 33566
3. 02/05/2018
Date of filing/registration in Florida
4. L18000031890
Document number
5. (a) MCCREA, JESICCA
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
2904 CHUKKAR COURT, PLANT CITY, FL 33566
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
2904 CHUKKAR COURT
PLANT CITY, FL 33566
- (b) MCCREA, JESICCA
Enter name of NEW Registered Agent and/or NEW Registered Office address:
2904 CHUKKAR COURT, PLANT CITY, FL 33566
NEW Registered Office Address:
2904 CHUKKAR COURT
PLANT CITY, FL 33566

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.

Ericca Hope Garrison
Signature of a member or authorized representative of a member

ERICCA HOPE GARRISON

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.

Jessica M. Mcrea
Signature of Registered Agent