

L18000048304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

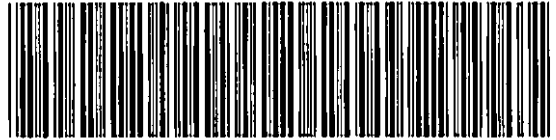
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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8-22-18

07/30/18--00124-FL-1-2018

FILED

2018 AUG 22 AM 10:55

SECRETARY OF STATE
TALLAHASSEE, FL

(R)

8-27-18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 15, 2018

DANA SIEGMUND
140 NE CIDER TERR
LAKE CITY, FL 32055 US

SUBJECT: TURN KEY MOTORS, LLC
Ref. Number: L18000048304

We have received your document for TURN KEY MOTORS, 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):

FAILED TO COMPLETE FORM.

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.

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 118A00016392

②

RECEIVED
2018 AUG 22 PM 2:56

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Turn Key Motors, 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:

Dana Siegmund

Name of Person

Turn Key Motors

Firm/Company

140 NE CIDER TERRACE

Address

LAKE CITY, FLORIDA 32055

City/State and Zip Code

TURNKEYMOTORSLC@GMAIL.COM

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

For further information concerning this matter, please call:

DANA SIEGMUND

904 718-1371

at ()

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

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: Turn Key Motors LLC
2. (a) 140 NE Cider Terrace (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)

Lake City, FL 32055

8-10-18

L18000048304

3. Date of filing/registration in Florida

4. Document number

5. (a) Kyra Hurley
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

300 E. Defender Drive Lake City, FL 32025
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

never show
have been to
location
this
person
Address

FL

(b) DANA SIEGMUND

Enter name of NEW Registered Agent and/or NEW Registered Office address:

OFFICE Location
←

140 NE Cider Terrace
NEW Registered Office Address:

LAKE CITY

FL

32055

FILED
2018 AUG 22 AM 10:55
SECRETARY OF STATE
TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that 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.

JOHN D HARRINGTON

Printed or typed name of signee

Signature of member or authorized representative of a member

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.

Signature of Registered Agent

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