

L180000 63365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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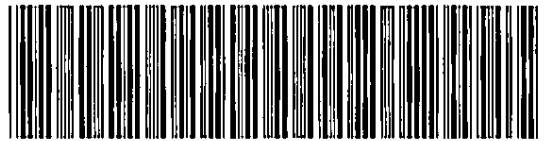
(Business Entity Name)

(Document Number)

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FEB 11 2019

T. LEVIEUX

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ACCURATE VA, 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:

PATRICIA L VEGA  
Name of Person

Firm/Company

3609 HARTLAND DR.  
Address

NEWPORT RICHEY FL 34655  
City/State and Zip Code

PVEGA6363@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PATRICIA L. VEGA at ( 201 ) 580-0176  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 22, 2019

PATRICIA VEGA  
3609 HARTLAND DR  
NEW PT RICHEY, FL 34655

SUBJECT: ACCURATE VA, LLC  
Ref. Number: L18000063365

We have received your document for ACCURATE VA, 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return 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) 245-6050.

Tracy L Lemieux  
Regulatory Specialist II

Letter Number: 719A00001577

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SECRETARY OF STATE  
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: ACCURATE VA, LLC

2. (a) 3609 HARTLAND DR  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)

New Port Richey Florida  
FLORIDA 34655

(b) 3609 HARTLAND DR  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)

New Port Richey  
FLORIDA 34655

3. MARCH 12, 2018  
Date of filing/registration in Florida

4. L180000063365  
Document number

5. (a) United States Corporation Agents Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

13302 Winding Oak Ct. A  
TAMPA, FL 33612

(b) PATRICIA L VERA  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Office Address:**

3609 HARTLAND DR  
New Port Richey, FL 34655

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.

[Signature]  
Signature of a member or authorized representative of a member

PATRICIA L. VERA  
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.

[Signature]  
Signature of Registered Agent