L 18000068990

(Re	questor's Name)						
(Address)							
(Address)							
(Cit	ty/State/Zip/Phone	: #)					
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(Document Number)							
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COVER LETTER

	egistration Section ivision of Corporations						
SUBJECT	Martyn Enterprises, LLC						
Name of Limited Liability Company							
Dear Sir o	r Madam:						
The enclos	sed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.					
Please reti	irn all correspondence concerning this ma	tter to the following:					
Patrick N	Martyn						
	Name of Person						
Martyn E	Enterprises, LLC						
	Firm/Company						
1763	Main ST APT 183 L)					
Dunedin	, FL 34698						
	City/State and Zip Code	······································					
pmartyn	@live.com						
E-ma	ail address: (to be used for future annual re	eport notification)					
For furthe	r information concerning this matter, pleas	se call:					
Patrick N	Martyn at	904 707-3371					
	Name of Person	Area Code & Daytime Telephone Number					
Re D: CI 26	rretr/courier address: egistration Section ivision of Corporations lifton Building 661 Executive Center Circle allahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:							
(T	\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					

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.

l. Na	ame of the limited liability company: Martyn Enterp	rises, l	LLC			
2. (a)		_ (t	o)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			_	of limited liability c BE POST OFFICE	
	1763 Main ST APT 183U	_		•	APT	
	Dunedin, FL 34698		Dunza	din, FL	34698	
	March 16, 2018		L180000	68990		
3.	Date of filing/registration in Florida	4		Document nu	umber	
5. (a)	United States Corporation Agents, Inc					
J. (a)	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of Sta	te:		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	<u> </u>	_		
	13302 Winding Oak Court A					
	Tampa , FL	33612		_	₩. N	
(b)	Patrick Martin	·		_	ALLAHA	. للر
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:		23 555£	<u> </u>
	1763 Main ST			_	PTC F	T
	NEW Registered Office Address:				0.00 C	0
	Apt 183 U			_	50 DX	
	Dunedin	346	98	 -		
the cha agent was/w the art	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia cre authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law ture of a member or authorized representative of a member or by accept the appointment as registered agent and agree	the region the line of the line limited	stered office ompany, it nited liability colling for the property of the prope	te and the busi is hereby confity company or mpany. Printed or type	iness office of the irmed that the circumstance of signee	ne registered hange(s) rovided in
provis the ob- to mer notifie	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I have the change of this change.	perform I for in (iereby c	ance of my Chapter 60 onfirm thai	duties, and I (5, F.S. Or, if t t the limited lid	am familiar with this document is ability company	n and accep being filed has been
	Partarel Illanton					

Signature of Registered Agent