L18000090313

(Requestor's Name)						
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Bu	siness Entity Nan	ne)				
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						





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18 MAY 21 PH 3: 07
SECRETARY OF STATE

K SALY MAY 22 2018

COVER LETTER

TO:

то:	Registration Section Division of Corporations								
SUBJ	SUBJECT:Name of Limited Liability Company								
Dear S	Sir or Madam:								
The er	nclosed Registered Agent/Registered Off	fice (Change and	fee(s) are submitted for filing.					
Please	return all correspondence concerning th	is m	natter to the	following:					
Alish	a Soletti								
	Name of Person			_					
Ame	rican Tarping LLC								
	Firm/Company								
8817	' SW 61st Ave.								
	Address								
Gain	esville, FL 32608								
	City/State and Zip Code			_					
alish	a.soletti@gmail.com								
 i	E-mail address: (to be used for future and	nual	report notif	ication)					
For fu	rther information concerning this matter	, ple	ase call:						
Alish	a Soletti	í	561	789-5140					
	Name of Person		\ <u></u>	Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Re Di P.(AILING ADDRESS: agistration Section vision of Corporations O. Box 6327 Ilahassee, Florida 32314					
	Enclosed is a check for the following	gam	ount:						
	■ \$25 Filing Fee		u \$:	55 Filing Fee & Certified Copy					
INHSI	8 (2/14)								

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				
i. (a) <u> </u>	Principal office address of limited liabelity company:	t	b)	Mailing address of limited liability company
	(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)
	1202 Hillsboro Mile #3A		1202 H	illsboro Mile #3A
	Hillsboro Beach, FL 33062	_	Hillsbor	ro Beach, FL 33062
	April 10, 2018		L18000	090313
	Date of filing/registration in Florida	4		Document number
(a)				
,	Registered Agent and Registered Office shown on the records of Michael Soletti	the Floric	a Dept. of Sta	 t te.
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	S)	-
	1202 Hillsboro Mile #3A		-	T. (2) 🙃
	Deerfield Beach	33062	,	
	Deerfield Beach , Ft	·		2 2
(b)	Enter name of NEW Registered Agent and/or NEW Registered	CAR		- Eq. 2
	The state of the way respected washing misson the way respected	Office at	MIES.	75 4
	Michael Soletti			
	NEW Registered Office Address:		······································	
	1202 Hillsboro Mile #3A			
		33062		-
char ent w s/we artic	mited liability company is not organized under the large or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited live authorized by an affirmative vote of the members of the organization or the operating agreement of the	the reg ability c of the lin limited	stered offic ompany, it nited habili liability cor	ex and the business office of the registe is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
	are of a member or authorized representative of a member			Printed or typed name of signee
ereb visio obli- nere fied	y accept the appointment as registered agent and aging of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I importing of this change.	ree to ac perform d for in hereby c	t in this cap ance of my Chapter 60 onfirm that	vacity. I further agree to comply with is dulies, and I am familiar with and acc 5, F.S. Or, if this document is being fill the limited liability company has been
	AND IN ILA CAIT SA			

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