L18000100208

(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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2019 HAY -7 PM 5: 17 SECKENANASSEE, FL

LLC PACH 5/21/19

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	Shelly's Catering LLC						
Name of Limited Liability Company							
Dear Si	or Madam: losed Registered Agent/Registered Office Change and fee(s) are submitted for filing.						
The end	closed Registered Agent/Registered Offic	e Change and	fee(s) are submitted for filing.				
Please 1	return all correspondence concerning this	matter to the	following:				
Debor	rah F. Hogan						
_	Name of Person						
The H	ogan Law Firm						
	Firm/Company						
20 S.	Broad St.	St.					
	Address						
Brook	sville, FL 34601						
	City/State and Zip Code		_				
vcurry	@hoganlawfirm.com						
E-	mail address: (to be used for future annu	al report notifi	cation)				
For furt	her information concerning this matter, p	lease call:					
Debora	ah F. Hogan	352	799-8423				
	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	Reg Div P.O	AILING ADDRESS: gistration Section rision of Corporations b. Box 6327 lahassee, Florida 32314				
	Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	□ \$5	5 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.

I. Na	nme of the limited liability company: Shelly's Cater	ring LL	С	
2. (a)	12833 Sugar Creek Blvd		12833	Sugar Creek Blvd
. ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`'		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Hudson, FL 34669		Hudson	ı, FL 34669
		_		
	4/20/18		L180001	00208
(11)	Date of filing/registration in Florida	4.		Document number
	United States Corporation Agents, Inc.			
	Registered Agent and Registered Office shown on the records of the 13302 Winding Oak Court Suite A	the Florida	1 Dept. of Sta	te·
	Registered Office Address (MUST BE FLORIDA STREET A	- DAREC	 -	_
	INGST BE PLONIDA STREET A	<u>ww.ess</u>	7	2019 SEC T)
	Tampa .FL	33612		2019 HAY SECIKLIA
	The Hogan Law Firm	-		Y-7 PH S AHASSEE.
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	
	20 S. Broad St.			STATE
	NEW Registered Office Address:			-
		·		
	Brooksville FL	34601		
gent w /as/wei	mited liability company is not organized under the law age or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of these of organization or the operating agreement of the last	the regis bility co I the lim limited li	tered office mpany, it i ited liabilit	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in apany.
Signan	re of a member or authorized representative of a member		TOTE VIIIS	Printed or typed name of signee
hereb rovisió ne oblip mer fi otifiel	v accept the appointment as registered agent and agre ns of all statutes relative to the proper and complete p attons of my position as registered agent as provided preflect a change in the registere legit, add e	e to act performa for in C	in this capa ince of my in hapter 605 ignored in the	acity. I further agree to comply with the

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