

L18 000 112 707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

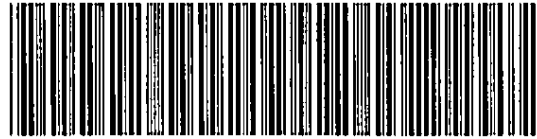
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400344021034

05/08/20--01010--013 **25.00

20 MAY -8 PM 12:44

REV 2-8-2003
C. M. C. M. R.

COVER LETTER

TO: Registration Section
Division of Corporations

Space Coast Leasing LLC

SUBJECT: _____
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:

Terry J Ward

Name of Person

Space Coast Leasing

Firm/Company

332 formosa dr

Address

Cocoa Beach Florida 32931

City/State and Zip Code

Terryjudsonward@gmail.com

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

For further information concerning this matter, please call:

Christopher Deak

814

8739977

at (_____) _____

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

20 MAY -8 PM 12:45

**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.

Space Coast Leasing LLC

1. Name of the limited liability company: _____
214 S Orlando Ave Cocoa Beach, Florida 32931

2. (a) Principal office address of limited liability company: _____ (b) Mailing address of limited liability company: _____
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

05/04/2018

L18000112707

3. Date of filing/registration in Florida _____ 4. Document number _____
Terry Judson Ward

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
214 S Orlando Ave

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Cocoa Beach 32931
FL

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

NEW Registered Office Address:
332 formosa dr

Cocoa Beach 32931
FL

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.

Terry Judson Ward

Signature of a member or authorized representative of a member

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 of Registered Agent

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

20 MAY -8 PM 12:45