

L18000 153526

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

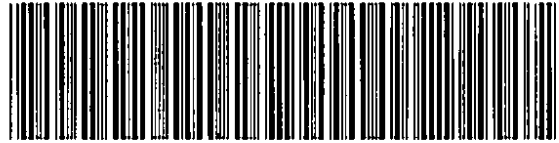
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2020 JUN 23 AM 8:30

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LED POOLS
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 Thompson

Name of Person

Secretary

Firm/Company

11200 Sangria Court

Address

Boca Raton FL 33498

City/State and Zip Code

patgeorge57@aol.com

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

For further information concerning this matter, please call:

Patricia Thompson at (954) 515-4128

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

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: R & D POOLS LLC
2. (a) 19410 Colorado Circle (b) 19410 Colorado Circle
Principal office address of limited liability company: Mailing address of limited liability company.
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
Boca Raton FL 33434 Boca Raton FL 33434

3. 6-18-20 6/22/2018 L8000153526
Date of filing/registration in Florida: Document number

5. (a) United States Corporate Agents, Inc
Registered Agent and Registered Office shown on the records of the Florida Dept. of State.
5575 S. Semoran Blvd. Suite 36
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Orlando FL 32822

(b) Patricia Thompson
Enter name of NEW Registered Agent and/or NEW Registered Office address.

11200 Sangria Court
NEW Registered Office Address

954-815-4128 Fax 561-961-0698
Boca Raton FL 33498

2020 JUN 23 AM 8:30

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.

Daniel Mallory
Signature of a member or authorized representative of a member

Daniel Mallory
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.

Patricia Thompson
Signature of Registered Agent