

	(Requestor's Name)					
	(Address)					
	(Address)					
	(City/State/Zip/Phone #)					
PICK-UF	P WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
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COVER LETTER

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TO:	Registration Section Division of Corporations	·	
SUBJE	Tires Unlimited & Service LL	_C	
	Nam	ne of Limited	Liability Company
Dear S	ir or Madam:		
The en	iclosed Registered Agent/Registered Off	ice Change a	nd fee(s) are submitted for filing.
Please	return all correspondence concerning th	is matter to ti	ne following:
Deve	II K Edwards		
	Name of Person	-	
Tires	Unlimited & Service LLC		
	Firm/Company	-	
1037	7 County Line Road		
	Address		-
Sprin	g Hill, FL US 34609		
_	City/State and Zip Code		
tiresu	ınlimitedandservice@gmail.com		
F	E-mail address: (to be used for future and	ual report no	otification)
For fu	rther information concerning this matter,	please call:	
Deve	II Edwards	860 at (982-6300
	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	Ø	\$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.

1. Na	me of the limited liability company:	ed & Servi	ce LLC	<u></u>	
2. (a)	10377 County Line Road	(b) <u></u>	(b) 6488 Jamaica Road		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			limited liability company: E POST OFFICE BOX)	
	Spring Hill, FL US 34609	<u>S</u>	pring Hill, FL US 34	606	
	June 22, 2018		8000153600		
3.	Date of filing/registration in Florida	4.	Document nur	nber	
5. (a)	Devell K Edwards				
J. (14)	Registered Agent and Registered Office shown on the records of	f the Florida De	pt. of State:		
	Tires Unlimited & Service LLC				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)			
	6488 Jamiaca Road			∴o. 16	
	Spring HIII, F	34606			
(b)	Devell K Edwards		_	FILED JIN 28 PM 組織編	
(-)	Enter name of NEW Registered Agent and/or NEW Registere	d Office addre	<u> </u>		
	Tires Unlimited & Service LLC			1: 07	
	NEW Registered Office Address:			**	
	6488 Jamaica Road	_			
	Spring Hill, F	_L 34606			
the cha agent v was/we the art Signa I here provisi the obi to mer	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ture of a member of authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and completeligations of my position as registered agent as provided in writing of this change.	of the register iability composite limited liab Devel prec to act in eperformance of for in Che	red office and the busine bany, it is hereby confir d liability company or a ility company. Edwards Printed or typed this capacity. I further the of my duties, and I are the folds. F.S. Or, if the	ess office of the registered med that the change(s) as otherwise provided in name of signee agree to comply with the in familiar with and accept is document is being filed	
	C Paging A Annual				
Signafi	re-of-Registered Agent				