## 119000171743

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TO BE SECUREDRATION OF THE PROPERTY OF THE PRO

Ra Change

## **COVER LETTER**

	: Registration Section Division of Corporations			
SUBJEC	CT: <u>Lee Property In</u> N	me of Limited Liability Company		
Dear Sir	or Madam:			
The enc	losed Registered Agent/Registered C	ffice Change and fee(s) are submitted for filing.		
Please re	eturn all correspondence concerning	his matter to the following:		
<u>DEVo</u>	Name of Person			
LEE	PROPERTY IMPROVEMENTS Firm/Company	LLC		
7609	BROOK FOREST DR Address	<del></del>		
PENSA	ACOLA FL 32514 City/State and Zip Code			
O.LEE 1405 & YAHOO. COM E-mail address: (to be used for future annual report notification)				
For furtl	her information concerning this matt	er, please call:		
DEX	Name of Person	at ( <u>\$60</u> ) <u>287 - 1301</u> 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:				
	S25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

INHS18 (2/14)

ANTENDA DE CORTORATION

## 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	me of the limited liability company: LEE PEOP	PERTY IMPROVEMENTS LLC	
	7609 BROOK FOREST OR  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b) 7609 Blook FOREST  Mailing address of limited liability compa  (Note: MAY BE POST OFFICE BO.)	
	PENSACOLA, FL 32514	PENSACOLA, FL 32514	
	JULY 17TH, 2018	L18000171743	
3.	Date of filing/registration in Florida	4. Document number	
5. (a)	CHEYENNE MOSELEY UNITED STAT Registered Agent and Registered Office shown on the records of th  13302 WINDING OAK COUPT Registered Office Address (MUST BE FLORIDA STREET A)	the Florida Dept. of State:	C
	TAMPA ,FL_	-33612	<u>:</u>
(b)	DEVON LEE. Enter name of NEW Registered Agent and/or NEW Registered (	1 Office address:	SISH OF
	7609 BROOK FOREST DR NEW Registered Office Address:	B PM12: 09	RY A STAIL COM ORATIONS
	PENSACOLA ,FL		<u> </u>
the cha agent w was/we	mited liability company is not organized under the law- inge or changes are made, the Florida street address of to will be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	f the registered office and the business office of the re lability company, it is hereby confirmed that the chang of the limited liability company or as otherwise provide	egistered ge(s)
_/_	In I	DEVON LEE  Printed or typed name of signee	
I herel provisi the obli	wife of a member or authorized representative of a member by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have the change.	ree to act in this canacity. I further agree to comply y	with the d accept ing filed : been