

L18000 179011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

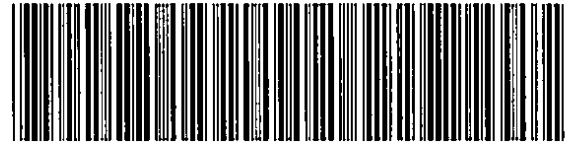
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100321592371

12/13/18--01008--016 \*\*55.00

18 DEC 13 12 27

C. SIMMONS  
DEC 26 2018

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 123 GLAMP, LLC DBA RV GLAMPING  
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:

Barbara Tulske  
Name of Person

RV GLAMPING  
Firm/Company

360 Tangerine Ave  
Address

Merritt Island, FL 32953  
City/State and Zip Code

Barb@RV-GLAMPING.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara Tulske at ( 321 ) 765-3730 or 610-2566  
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: 123 GLAMP, LLC DBA RV GLAMPING
2. (a) 3 W. Point Dr. (b) 3 W. Point Dr.

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

Cocoa Beach, FL 32931

Cocoa Beach, FL 32931

3. 7/25/18  
Date of filing/registration in Florida

4. L 180001790 11  
Document number

5. (a) Barbara Tulske  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

3 W. Point Dr.  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Cocoa Beach FL 32931  
\_\_\_\_\_, FL \_\_\_\_\_

- (b) \_\_\_\_\_  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Office Address:

360 Tangerine Ave  
Merritt Island, FL 32953

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.

Barbara Tulske  
Signature of a member or authorized representative of a member

Barbara Tulske  
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.*

Barbara Tulske  
Signature of Registered Agent