118000199329

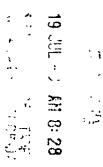
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
h 19				

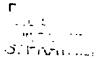
Office Use Only



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June 27, 2019

DIANE M FREANEY 2180 LAKE OSBORNE DR #10 LAKE WORTH, FL 33461

SUBJECT: FREANEY & COMPANY, LLC

Ref. Number: L18000199329

We have received your document for FREANEY & COMPANY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 619A00013117

7/5/19 THANK YOU DIONNE SCOTT. I AM SORRY I.
FORGOT TO SIGN THIS FORM - OR DID I?
PRACE!
SIANE

RECEIVED
JUL 0 9 2019

www.sunbiz.org

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TO:	Registration Section Division of Corporations		,				
SUBJI	FREANEY & COMPANY, LLC						
	Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Office	Change and fe	ce(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:							
DIAN	E M FREANEY						
··	Name of Person		-				
FREA	ANEY & COMPANY, LLC						
	Firm/Company		-				
2180	LAKE OSBORNE DRIVE #10						
	Address		-				
LAKE	WORTH, FL 33461						
	City/State and Zip Code		-				
dfrea	ney@gmail.com						
E-mail address: (to be used for future annual report notification)							
For fu	rther information concerning this matter, ple	ase call:					
Diane M Freaney 32		323	632-6638				
	Name of Person	<u> </u>	Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divis P.O.	Stration Section sion of Corporations Box 6327 ahassee, Florida 32314				
	Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy				

STATEMENT OF CHANGE OF REGISTERED ØFFICE 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	nme of the limited liability company:	COMPANY, LLC	
2. (a)	2180 LAKE OSBORNE DRIVE #10	(b) 2180 L/	AKE OSBORNE DRIVE #10
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- '	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	LAKE WORTH, FL 33461	LAKE W	VORTH, FL 33461
	8/20/2018	L180001	99329
3. (a)	Date of filing/registration in Florida SAUERBERG, ERIC M	4.	Document number
()	Registered Agent and Registered Office shown on the records of t	the Florida Dept, of Stat	e:
	Registered Office Address (MUST BE FLORIDA STREET) 102	<u>1DDRESS)</u>	. '
	PALM BEACH GARDENS FL	33410	- 1900 - 1000 - 1000
(b)	FREANEY. DIANE M		
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	** **** *** ***
	2180 LAKE OSBORNE DRIVE #10		8: 22 8
	NEW Registered Office Address		<u> </u>
	LAKE WORTH FL	33461	_
the charge agent was/w the art	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liacre authorized by an affirmative vote of the members of icles of organization or the operating agreement of the different particular or authorized representative of a member by growth the appointment of a registered growth and agree the growth the appointment of a registered growth and agree the control of the con	the registered office ability company, it is of the limited liability continuited liability corporated DIANE M FR	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in appany. REANEY Printed or typed name of signee
provis, the ob- to mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided elv reflect a change in the registered office address. It din writing of this change.	ve to act in this cap performance of my I for in Chapter 60. hereby confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5. F.S. Or, if this document is being filed the limited liability company has been
Signati	MA DIANE M FREADEY 1	1-71	