

LI8000 222580

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

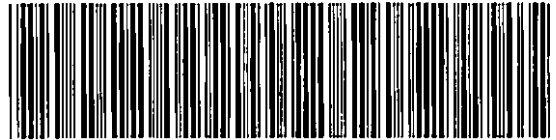
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



500321587305

12/12/18--01023--007 \*\*25.00

FILED  
2018 DEC 12 PM 4:05  
CLERK OF SUPERIOR COURT  
ALABAMA

RA/RO/chg

DEC 21 2018

ALBRITTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 7525 MANASOTA KEY ROAD RENTAL, LLC  
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:

KIP DOYLE  
Name of Person

7525 Manasota Key Road Rental, LLC  
Firm/Company

7762 N. SHERIDAN RD  
Address

CHICAGO IL 60626  
City/State and Zip Code

Kip@lockloadinc.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Doyle at (312) 520 8841  
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: 7525 MANASOTA KEY ROAD RENTAL, LLC
2. (a) 7525 Manasota Key Rd (b) 7762 N. SHERIDAN RD

Principal office address of limited liability company:

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

Englewood FL 34223

Mailing address of limited liability company:

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

CHICAGO, IL 60626

3. Sept 19, '18 Date of filing/registration in Florida
4. L18000222580 Document number

5. (a) United States Corporation Agents Inc

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

13302 Winding Oak (Court A)

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

~~Tampa~~

Tampa

FL 33612

- (b) MARK DOYLE

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

7520 Manasota Key Rd

**NEW Registered Office Address:**

Englewood FL 34223

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.

Kip Doyle  
Signature of a member or authorized representative of a member

KIP DOYLE  
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.

Mark Doyle  
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00