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## **COVER LETTER**

TO: **Registration Section Division of Corporations** 

WEY Engineering, PLLC

SUBJECT:

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:

Matthew G. Wey, PE

Name of Person

WEY Engineering, PLLC

Firm/Company

301 W. Platt St, #437

Address

Tampa, FL 33606

City/State and Zip Code

mwey@weyeng.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew G. Wey, PE	813 924-6910 at ()
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following a	mount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

## INHS18 (2/14)

□ \$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. N	ame of the limited liability company:	Engineer	ing, I	PLLC				
2. (a)	WEY Engineering, PLLC			b)WEY En	igineering, PLLC			
2. (u)	Principal office address of limited liability con ( <u>Note: MUST BE STREET ADDRESS</u>		- `	(0)				-
	301 W. Platt St, #437			301 W. F	Platt ST, #437			
	Tampa, FL 33606		_	Tampa,	FL 33606			
	09/28/2018			L1800023	80399			
3.	Date of filing/registration in Florida	1	4.		Document number			
5. (a)	·							
	Registered Agent and Registered Office shown on the	records of th	e Florid	la Dept. of State	::	۶	_	
	Matthew G. Wey						18 (	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					H N	001	
	710 S. Davis Blvd			,		SSE	24	
	Tampa	. FL <sup>3</sup>	3606	ì		<del>ل</del> و <b>ل</b>	Рн	
		,				10532	<del></del>	کیہ ا
(b)							25	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	Registered (	)ffice a	<u>ddress</u> :				
	NEW Registered Office Address:							
	301 W. Platt St, #437							
	Tampa	FL 3	3606	5				
						- ·		-
If the l the cha	imited liability company is not organized und ange or changes are made, the Florida street a	ler the laws ddress of t	s ot th he reg	e State of Flo istered office	e and the business of	firmed	that al he reg	iter istered
agent v	will be identical. Or, in the case of a Florida l ere authorized by an affirmative vote of the m	limited liab	oility c	company, it is	s hereby confirmed t	hat the c	hange	:(s)
the art	icles of organization or the operating agreeme	ent of the li	imited	liability com	ipany.	<b>r</b>		
	Matthew J. Way H ture of a member or authorized representative of a mem	$\underline{e}$	Ma	atthew G. V		<u> </u>		
	ture of a member or authorized representative of a mem			t in this are-	Printed or typed name of	_	<b>n</b> h	the the

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.

atten Signature of Registered Agent

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