

L18000234955

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH IN
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: BIB1018 DBA ALL STATES TRADING AND

2. (a) 11781 Coastal LN W

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Jacksonville FL 32258

(b) 11781 Coastal LN W

Mailing address of limited liability company

(Note: MAY BE POST OFFICE BOX)

Jacksonville FL 322

3. 10/03/2018
Date of filing/registration in Florida

4. # L18000234955
Document number

5. (a) Judith H Wise
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

11781 Coastal LN W

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Jacksonville
FL 32258

(b) Brittney N Someillan
Enter name of NEW Registered Agent and/or NEW Registered Office address:

12929 Mandarin Point Lane

NEW Registered Office Address:

Jacksonville FL
32223

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FILED

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.

Brittney N Someillan
Signature of a member or authorized representative of a member

Brittney Someillan
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 understand 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.

Brittney N Someillan
Signature of Registered Agent

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