118000240097

(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:							





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FILED

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CEILAND OF JAME



COVER LETTER

то:	Registration Section Division of Corporations							
SUBJI								
	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:								
Thom	nas J Palumbo							
	Name of Person	.=						
Humpty Dumpsters LLC								
	Firm/Company							
1230	Port Malabar Blvd							
	Address							
Palm	Bay/ Florida, 32905							
	City/State and Zip Code							
bbadı	rt15@gmail.com							
E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
Joan	Palumbo	954 at (610 3308					
	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 Fallahassee, Florida 32314					
	Enclosed is a check for the following amount:							
	□ \$25 Filing Fee	2	\$55 Filing Fee & Certified Copy					

INHS18 (2/14)

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. Na	me of the limited liability company: Humpty Dump				
2. (a)	1230 Port Malabar Blvd	_ (?)	ort Malabar Blvd,	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Palm Bay		Palm Ba	ay .	
	florida	-	Florida		
	10/10/2018		L1800024	40097	
3.	Date of filing/registration in Florida	4.		Document number	
5 (a)	Palumbo, Thomas J				
5. (a)	Registered Agent and Registered Office shown on the records of the Palumbo, Thomas J	he Florid	a Dept. of Stat	e:	
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	2)		
	1230 Port Malabar Blvd			ze. 5	
	Palm Bay	32905	2905		
(b)	Palumbo, Thomas J Enter name of NEW Registered Agent and/or NEW Registered Office address: 623 North Cocoa Blvd			TALED M 28 M 9	
	NEW Registered Office Address:			28 28	
	623 North Cocoa Blvd				
	023 NORTH COCOA BIVG			_	
	Cocoa , FL	32922		_	
the cha agent w was/we the arti	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable reauthorized by an affirmative ofte of the members of cles of organization or the operating agreement of the law accept the appointment as registered agent and agreems of all statutes relative to the proper and complete placetions of my position as registered agent as provided by reflect a change in the registered office address. I he limited this change in the registered of the address. I he limited this change in the registered of the address.	the regibility control the linited	stered office ompany, it in nited liability liability con Thon	e and the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in an appear. Printed or typed name of signee	
	re of Regimered Agent				