

218 000 246 950

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

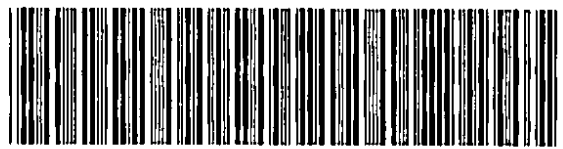
(Business Entity Name)

(Document Number)

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2019 JAN -2 PM 6:05
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JAN 12 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ELLIOTT R OWENS JR 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:

Elliott R Owens Jr
Name of Person

ELLIOTT R OWENS JR LLC
Firm/Company

342 S Shore Dr
Address

Osprey, FL 34229
City/State and Zip Code

owens.randy1172@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elliott R Owens Jr at (352) 895-8338
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.

ELLIOTT R OWENS JR LLC

1. Name of the limited liability company: _____
 Elliott R Owens Jr. _____ Elliott R Owens Jr. _____
 2. (a) _____ (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:
 (Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)
 342 S Shore Dr. 342 S Shore Dr.
 Osprey, FL 34229 Osprey, FL 34229

10/22/2018 _____ L18000246950 _____
 3. Date of filing/registration in Florida 4. Document number

5. (a) _____
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
 UNITED STATES CORPORATION AGENTS, INC.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
 13302 WINDING OAK COURT A
 Tampa, FL 33612

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

(b) Elliott R Owens Jr _____
 Enter name of NEW Registered Agent and/or NEW Registered Office address:
 Elliott R Owens Jr _____
NEW Registered Office Address:
 342 S Shore Dr _____
 Osprey, FL 34229 _____

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.

Elliott R Owens Jr _____ Elliott R Owens Jr _____
 Signature of a member or authorized representative of a member 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.

Elliott R Owens Jr _____
 Signature of Registered Agent