

L18000247123

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

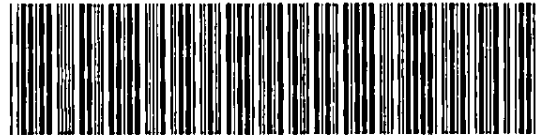
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



300321419443

12/17/18--01021--029 \*\*25.00

2018 DEC 17 PM 2:31

FILED

FILED

D. BRUCE  
JAN 05 2019  
502 50 AM

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** US Coastal Traders, 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:

Millett, Andrew  
Name of Person

US Coastal Traders, LLC  
Firm/Company

27750 S Roslin PL  
Address

Bonita Springs, FL 34135  
City/State and Zip Code

Millett549@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Millett, Andrew at ( 207 ) 441-4499  
Name of Person Area Code & Daytime Telephone Number

FILED  
2018 DEC 17 PM 2:31  
TALLAHASSEE, FLORIDA

**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: US Coastal Traders, LLC

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)*  
27750 S Roslin PL P.O. Box 3014  
Bonita Springs, FL 34135 Bonita Springs, FL 34133

3. 10/22/2018 4. L18000247183  
 Date of filing/registration in Florida Document number

5. (a) \_\_\_\_\_  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Millett, Andrew  
 Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
Millett, Andrew  
27750 S Roslin PL Bonita Springs, FL 34135

(b) \_\_\_\_\_  
 Enter name of NEW Registered Agent and/or NEW Registered Office address:  
 \_\_\_\_\_  
NEW Registered Office Address:  
 \_\_\_\_\_  
 \_\_\_\_\_, FL \_\_\_\_\_

FILED  
 2018 DEC 17 PM 2:31  
 TALLAHASSEE, FLORIDA  
 STATE DEPARTMENT OF REVENUE

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.

*Andrew Millett*  
 Signature of a member or authorized representative of a member

ANDREW MILLETT  
 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.*

*Andrew Millett*  
 Signature of Registered Agent

PREPARED BY

DATE

1 TO WHOM IT MAY CONCERN:

2  
3 I HOPE THIS IS THE RIGHT FORM. I'M LOOKING TO  
4 TAKE MY DAUGHTER, LARIANN MILLETT OFF MY BUSINESS. MY  
5 CREDIT UNION WILL NOT ALLOW ME TO OPEN UP A BUSINESS ACCOUNT  
6 WITH HER ON IT. PLEASE CONTACT ME IF YOU NEED TO. MY CELL  
7 PHONE NUMBER IS (207)-441-4499. I ALSO NEED MY PHYSICAL  
8 ADDRESS AS SHOWN ON THE AMENDMENT. I APPRECIATE YOUR  
9 TIME INTO THIS MATTER.

10  
11 Respectfully  
12 And Millett 12/15/2018

2018 DEC 17 PM 2:31

FILED