118000249816

(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:	7				
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COVER LETTER

TO:	Registration Section Division of Corporations	,* •			
	Koh Muay Thai - Pinellas	LLC			
SUBJ	JECT:				
	Na	me of Limited	Liability Company		
Dear	Sir or Madam:				
The e	nclosed Registered Agent/Registered Of	ffice Change ar	nd fee(s) are submitted for	r filing.	
Please	e return all correspondence concerning t	his matter to th	e following:		
Scot	t Jenson				
	Name of Person				
				> B	
	Firm/Company				1
1182	25 Derbyshire Dr				_
	Address				
Tam	pa, FL 33626			بن س	
	City/State and Zip Code			Tr. O	
scott	tmjenson@gmail.com				
	E-mail address: (to be used for future an	inual report not	tification)		
For fu	orther information concerning this matte	r. please call:			
Scot	t Jenson	813	416-2573		
		at ()		
	Name of Person		Area Code & Daytime	e Telephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	}- 1 F	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Callahassee, Florida 32314	‡	
	Enclosed is a check for the followin	g amount:			
	☑ \$25 Filing Fee	O	\$55 Filing Fee & Certified	d 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

1825 Derbyshire Dr	(b)	11825 Derbyshire Dr
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(" /	Mailing address of limited liability compar (Note: MAY BE POST OFFICE BOX)
Tampa, FL 33626	_	Tampa, FL 33626
0/24/2018	!	_18000249816
Date of filing/registration in Florida Jnited States Corporation Agents, INC.	4.	Document number
- · · · · ·	he Florida	Dept. of State:
egistered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	
Fampa ,FL	33612	
cott Jenson		d l
nter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	ress:
1825 Derbyshire Dr		w w
EW Registered Office Address:		
FI.	33626	
FL., FL., ited liability company is not organized under the law e or changes are made, the Florida street address of be identical. Or, in the case of a Florida limited lia	s of the ! the regist	ered office and the business office of the reg
	(Note: MUST BE STREET ADDRESS) Tampa, FL 33626 O/24/2018 Date of filing/registration in Florida United States Corporation Agents, INC. Registered Agent and Registered Office shown on the records of the state o	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Tampa, FL 33626 Date of filing/registration in Florida 4. United States Corporation Agents, INC. Legistered Agent and Registered Office shown on the records of the Florida 13302 Winding Oak Court A Legistered Office Address (MUST BE FLORIDA STREET ADDRESS) Fampa 33612 Cott Jenson There name of NEW Registered Agent and/or NEW Registered Office address 1825 Derbyshire Dr EW Registered Office Address:

Signature of Registered Agent