

L18000 262313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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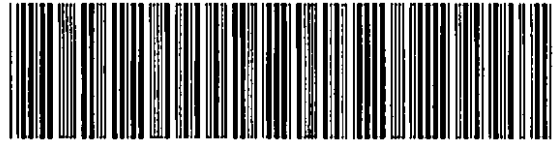
(Business Entity Name)

(Document Number)

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JAN 07 2019
S. YOUNG

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18 DEC 21 AM 8:01
U.S. DISTRICT COURT
FALLAHSSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Steel Acorn, LLC DBA Steel Acorn Designs

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:

Stephanie Cambria

Name of Person

Steel Acorn, LLC DBA Steel Acorn Designs

Firm/Company

1121 W. Price Blvd #11

Address

North Port, FL 34288

City/State and Zip Code

steelacorndesigns@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephanie Cambria

at (727

459-2529

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

FILED
18 DEC 21 AM 8:01
TALLAHASSEE, FLORIDA

**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: Steel Acorn, LLC DBA Steel Acorn Designs

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)

1121 W. Price Ave #11
North Port, FL 34288 SC

1121 W. Price Ave #11
North Port, FL 34288 SC

3. November 8, 2018 4. L18000262313
Date of filing/registration in Florida Document number

5. (a) Stephanie Cambria
Registered Agent and Registered Office shown on the records of the Florida Dept. of State
Steel Acorn, LLC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
2706 Woodward Ave
North Port, FL 34286

(b) Same
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Same
NEW Registered Office Address:
1121 W. Price Blvd #11
North Port, FL 34288

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.

Stephanie Cambria
Signature of a member or authorized representative of a member

Stephanie Cambria
Printed or typed name of signer

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.

Stephanie Cambria
Signature of Registered Agent

FILED
18 DEC 21 AM 8:01
TALLAHASSEE, FLORIDA