L19000008388

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP		MAIL
(Ru	siness Entity Nar	ma)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	.]

Office Use Only



200342762692

#55.00

04/03/20--01006--013 ••140.00

RAICHZ

APR 23 2020 I ALBRITTON

COVER LETTER 6

Division of Corporations									
SUBJECT: Carter 5 Communications, UC 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:									
Richard J Hussey Name of Person									
Carter J Communications, LLC Firm/Company									
1271 DOCKSicle drive									
Lu +2, FL 33559 City/State and Zip Code									
richard. hussey O Carter i Communications. Com E-mail address: (to be used for future annual report notification)									
For further information concerning this matter, please call:									
Richard Hussey at (941) 780 - 8483 Name of Person Area Code & Daytime Telephone Number									
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303									

\$55 Filing Fee & Certified Copy

INHS18 (2/14)

□ \$25 Filing Fee

Enclosed is a check for the following amount:

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. No	ame of the limited liability company:	I Con	munic	ations	,LC	C		
2. (a)	1271 Dockside Chrive	-	1271 00					
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Maili	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	Lutz, FL 33559		Lutz.	FL 33	559			
								
	3/31/2020		L19000008388					
3.	Date of filing/registration in Florida	4.	Doc	ument numb	er			
5. (a)	John E Hussey							
. ,	Registered Agent and Registered Office shown on the records of	of the Florida De	ept. of State:					
	1271 DocUsicle drive							
	Registered Office Address (MUST BE FLORIDA STREE)	TADDRESS)			ر را الحد	20		
					- .)20 /		
	<u>Lutz</u> , F	:L 3355	9.			2020 APR -		
	A T . i					9		
(b)	RICHARD HUSSLY					PH 4:	[]]]	
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office addre	<u>'55</u> ';		=			
	1271 DOCKSIDE	Driv	<u></u>		Ξ΄.	9		
	NEW Registered Office Address:							
) , , , , , ,	22	55Q					
	<u>CCI7</u> ,F	1. <u> </u>	1					
If the I	imited liability company is not organized under the la	aws of the Sta	ate of Florida	, it is hereby	confirm	ned that	t after the	
change	or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited I	ne registered o	office and the	: business off	rice of th	ne regis	stered	
was/w	ere authorized by an affirmative vote of the members	of the limite	d liability cor	npany or as o	otherwis	se prov	ided in	
the aru	cles of organization or the operating agreement of the	_		y. Idina				
Signa	ture of a member or authorized representative of a member	KI	hard Prin	ited or typed na	me of sign			
I here	by accept the appointment as registered agent and as	gree to act in	this capacity	ر I further ag	zree to c	comply	with the	
provisi the obl to merc	ons of all statules relative to the proper and completing igations of my position as registered agent as providely reflect a change in the registered office address, It writing of this change.	e performanc ed for in Cha hereby confi	re of my dutie pter 605, F.S irm that the li	s, ånd I am Jo S. Or, if this d imited liabilit	amiliar docume ty comp	with ai nt is be any ha.	nd accept ing filed s been	
	re of Registered Agent							