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## COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Del Sol Supply 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:					
Barbara Lou Taylor Name of Person					
Del Sol Supply LLC Firm/Company					
2560 Judge Fran Jamieson Way # 1230					
Viera, FL 32940 City/State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Barbara L. Taylor at (304) 308-9002  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					

## 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.

r tortua.			
1. Name of the limited liability company: Del Sol	Sup	614	LLC
2. (a) Del Sul Supply LLC			Sol Supply LLC  Mailing address of limited liability company:
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
280 Suge Crest # 204		2 80	Sugarest # 2001
Wet Mel bourne, FL 32904		+ بھول	Melbourne, FL 32904
1/14/2019	_	∟19(	000014381
3. Date of filing/registration in Florida	4.		Document number
5. (a) Barbara L. Taylor Registered Agent and Registered Office shown on the records of the			_
	e Florida D	Pept, of St	ate:
Del Sol Supply LLC Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)		_
280 Sagecres+ # 204			_
West McIbourne .FL	3290	<u> </u>	19
(b) Enter name of NEW Registered Agent and/or NEW Registered O	Office addr	ess:	9 FEB - 7 FH 6: 2
NEW Registered Office Address:			=
2560 Judge Fran Jamie son	way	412	30 × 28
Viera .FL_	329	40	<u> </u>
If the limited liability company is not organized under the laws the change or changes are made, the Florida street address of the agent will be identical. Or, in the case of a Florida limited liab was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the liable was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the liable was/were authorized representative of a member.	he registe pility con the limite imited lia	ered officipany, it ed liabil bility co	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete positions of my position as registered agent as provided to merely reflect a change in the registered office address. I he notified in writing of this change.	e to act in erforman for in Ch ereby con	n this ca ice of mi apter 60 firm tha	pacity. I further agree to comply with the valuties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been

Signature of Registered Agent