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6000	124807
(Requestor's Name) (Address) (Address)	800343301448
(City/State/Zip/Phone #)	04/20/2001014007 **25.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	MAY 0 1 2020
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: SEPCC LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Craig Helmen

Name of Person

SEPCC LLC

Firm/Company

5789 Baltusrol Ct A202

Address

Sanibel, Florida 33957

City/State and Zip Code

chelmenc@gmail.com

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

_ at (<u>407</u>

For further information concerning this matter, please call:

Craig Helmen

Name of Person

____) 227 3554 Area Code & Davtime 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:

☑ S25 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.

I. Na	me of the limited liability company:				
2. (a)	Craig Helmen	(b) Craig	_(b) Craig Helmen		
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	5789 Baltusrol Ct A202	5780	Baltusrol Ct A202		
	Sanibel, Florida 33957	Sanit	pel, Florida 33957		
	May 16, 2019	L1900	0124807		
3.	Date of tiling/registration in Florida	4.	Document number		
5. (a)	United States Corporation Agents, Inc.				
	Registered Agent and Registered Office shown on the record	ds of the Florida Dept. of	State:		
	5575 S. Semoran Blvd				
	Registered Office Address (MUST BE FLORIDA STR	EET ADDRESS)	R 20		
	Suite 36		CE		
	Orlando	32822			
		_, FL			
(b)	Craig Helmen	_, FL			
(b)	Craig Helmen Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>				
(b)					
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>				
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u> 5789 Baltusrol Ct				

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.

Signature of a member or authorized representative of a member

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.

2020 Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00