## L19000 125 453

(Requestor's Name)					
(Address)					
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( tables,					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Dusiness Emity Name)					
(Document Number)					
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## **COVER LETTER**

	ision of Corporations					
SUBJECT:	NON-STOP PROPERTY MANAGEMENT LLC					
	Name of Limited Liability Company					
Dear Sir or N	Madam:					
The enclosed	d Registered Agent/Registered Office	Change and fee(s) are submitted for filing.				
Please return	all correspondence concerning this	natter to the following:				
WADE WA	ALKER					
	Name of Person					
NON-STO	P PROPERTY MANAGEMENT	LLC				
	Firm/Company					
10 NW 11	OTH AVE					
	Address					
PLANTAT	ION, FL 33324					
	City/State and Zip Code	<del></del>				
	WRENCE2016@YAHOO.COM					
É-mail	address: (to be used for future annual	report notification)				
For further in	nformation concerning this matter, ple	ease call:				
WADE WA		at ()				
	Name of Person	Area Code & Daytime Telephone Number				
	EET/COURIER ADDRESS:	MAILING ADDRESS:				
_	stration Section	Registration Section				
	sion of Corporations	Division of Corporations				
	on Building	P.O. Box 6327				
	Executive Center Circle	Tallahassee, Florida 32314				
Talla	ahassee, Florida 32301					
Encl	osed is a check for the following an	iount:				

□ \$55 Filing Fee & Certified Copy

\$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

2. (a)	ame of the limited liability company: NON-STOP P  10 NW 110TH AVE PLANTATION, FL 33324	,	<sub>b)</sub> 10 NV	V 110TH AVE PLANTATION, FL 333
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ '		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	07/26/2019	_		0125453
3.	Date of filing/registration in Florida	4.	-	Document number
5. (a)	WADE WALKER			
	Registered Agent and Registered Office shown on the records of the 10 NW 110TH AVE  Registered Office Address (MUST BE FLORIDA STREET A	ate: 		
	Registered Office Address MOST BE PLURIDA STREET A.	<u>DDKES</u>	<u>3)</u>	
	PLANTATION , FL	33324	ļ	TILE TO THE TO THE TIME TO THE
(b)	DAWN LAWRENCE			ENASSEE A
(-)	Enter name of NEW Registered Agent and/or NEW Registered C	Office a	ddress:	
	10 NW 110TH AVE			AND: 27
	NEW Registered Office Address:			
	PLANTATION .FL	33324	ļ	<del></del>
agent v	imited liability company is not organized under the law- inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regined in the line in the	istered offic ompany, it nited liabil liability co	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.
Signat	ure of a member or authorized representative of a member		MH	Printed or typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change.	e to ac erform for in ereby c	t in this cap nance of my Chapter 60 confirm tha	pacity. I further agree to comply with the duties, and I am familiar with and accept 15. F.S. Or, if this document is being filed the limited liability company has been

Signature of Registered Agent