	744457
(Requestor's Name) (Address) (Address)	1003349369
(City/State/Zip/Phone #)	
(Business Entity Name) (Document Number)	08/27/1601019007
Certified Copies Certificates of Status Special Instructions to Filing Officer:	
	1917 - 27 PH P: 1
Office Use Only	MAHITE 5716203

	UVER LETTER
FO: Registration Section	
Division of Corporations	
The Big Die	
SUBJECT: <u>The Big Dig</u> Name of L	.imited Liability Company
	Sinned Bladiney Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
	tor to the following
Please return all correspondence concerning this matt	ter to the following:
the matter Ada and	
Name of Person	
Name of Person	
Firm/Company	
7998 SW 98th Ter	
Address	
Milmi, FL 33156	
Milimi, FL 33156 City/State and Zip Code	
hassell & small co. net	
hassell @ small co. net E-mail address: (to be used for future annual rej	port notification)
Conformation community this matter place	a an Us
For further information concerning this matter, please	
Hassell Moreno at ((<u>305)</u> <u>721.</u> 4839 Area Code & Daytime Telephone Numb
Name of Person	Area Code & Daytime Telephone Numt
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	Fananassee, Florida 52514
Enclosed is a check for the following amou	
□ \$25 Filing Fee	\$55 Filing Fee & Certified Copy
-	

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited le submits the following statement in order to change its registered office or registered agent, or both, Florida,

(a)	Principal office address of limited liability company:	(b) _	Mailing address of limit
	(<i>Note: MUST BE STREET ADDRESS</i>)		(<u>Note: MAY BE PO</u>
_			
	<u>UF/16/2019</u> Date of filing/registration in Florida		19000174457
	Date of filing/registration in Florida	4.	Document number
(a) _	John V. Wohlwend		
Ro	egistered Agent and Registered Office shown on the records	of the Florida D	ept. of State:
R	egistered Office Address (MUST BE FLORIDA STREE	<u>(TADDRESS)</u>	
_	430 S. Tamiami Trl		
	Ospreul	FL <u>3422</u>	29
(b)	John V - Wohlwend Inter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ad Office oddre	
121	nici nanc of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	eu once auure	<u></u> .
	430 5 Tamiami Trl.		
N	<u>(EW</u> Registered Office Address:		······································
_			
	Osprey	FL 342	29
he lim	ited liability company is not organized under the		
chang	e or changes are made, the Florida street address	of the registe	red office and the business of
s/were	l be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member	s of the limite	d liability company or as ot
article	es of organization or the operating agreement of the	he limited lial	
ionature	e of a member or authorized representative of a member		Hassell Mare Printed or typed name
	accept the appointment as registered agent and a	uneaa to act in	
prohi	THE EXTRANCE CONTRACTOR OF THE LEVEN VELOCET PLACEMENT (1992) THE CHILLE C	12766 10 461 11	ce of my duties, and I am fa apter 605, F.S. Or, if this d firm that the limited liability

Signature of Registered Agent

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