## L19000186308

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								

Office Use Only



500337126675

11/19/19--01024--009 \*\*25.00

SECINE SEA SE STATE STORY OF STATE

RA Change (Office)

DEC 1 6 2019

D CUSHING

## **COVER LETTER**

	egistration Section livision of Corporations							
SUBJEC	Pin Oak Web Designs, LLC							
30 ISI.C		Name of Limited Liability Company						
Dear Sir	or Madam:							
The enclo	osed Registered Agent/Registered Offi	ice Change a	ınd fe	e(s) are subn	nitted for filing.			
Please ret	turn all correspondence concerning the	is matter to t	he fo	llowing:				
Sherry	Haney							
	Name of Person	<del></del>		-				
Pin Oal	Web Designs, LLC							
	Firm/Company	,		-				
14401 F	Patty Berg Dr Unit 106							
	Address		_	-				
Fort My	vers, FL 33919							
···	City/State and Zip Code		,	-			 (, 3	
shaney	@pinoak.net							
E-m	nail address: (to be used for future ann	ual report no	otifica	ation)			- 5	유피. - 공진론
For furthe	er information concerning this matter,	please call:						
Sherry	Haney	417		848-085	4		ဖွဲ့ သ	STAT
11	Name of Person			Area Code &	Daytime Telepho	one Number	చ	ONS E
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301			Regis Divis P.O.	LING ADD stration Section of Corpo Box 6327 hassee, Flori	ion orations			
F	Enclosed is a check for the following	amount:						
Ç	\$ \$25 Filing Fee	ם	\$55	Filing Fee &	Certified Copy			

INHS18 (2/14)

## 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.

l. Na	me of the limited liability company: Pin Oak Web	Design	s, LLC				
2. (a)	14401 Patty Berg Dr	(b	14401 P	atty Berg Dr			
e. (a) <u>.</u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0,	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
	Unit 106		Unit 106				
	Fort Myers, FL 33919	Fort Myers, FL 33919					
	07/15/19		L1900018	36308			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	Haney, Sherry L						
). (u)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	::			
	16170 Bayside Pointe E						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	ž	•			
	#1706						
	Fort Myers	33908		•			
	, 11	L		•		- 7	
(n) _	Haney, Sherry L				ಡ		
	Enter name of NEW Registered Agent and/or NEW Registered	d Office add	iress:		5. 5.		
	14401 Patty Berg Dr				-= -= -=	77. 17.70 17.70	
	NEW Registered Office Address:			•	T.	: :3⊊	
	Unit 106		<del></del>	_	Ö	(E)	
	Fort Myers, F	L_33919			<u>သ</u>	GRATICHS	
the chargent vas/westhe arti	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited la cre authorized by an affirmative vote of the members cles of organization or the operating agreement of the ture of a member or authorized representative of a member	of the regisiability co of the limited I She	stered office ompany, it is ited liability iability com- erry Haney	e and the business office is hereby confirmed that the company or as otherwise apany.  Printed or typed name of signature.  I further goree to describe the confirmed or typed name of signature.	of the regis he change( se provided	stered (s) d in	
provisi the obl to mere	by accept the appointment as registered agent and complete ons of all statutes relative to the proper and complete igations of my position as registered agent as providely reflect a change in the registered office address, I if in writing of this change.	e performe ed for in C hereby co	unce of my o Chapter 605 Onfirm that i	duties, and I am familiar , F.S. Or, if this docume the limited liability comp	with and a nt is being any has be	iccept filed en	
Signatu	re of Registered Agent						