



**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Allied Pet 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:

Eric Rodriguez

Name of Person

Allied Pet Supply LLC

Firm/Company

125 S. STATE ROAD 7 SUITE 104 - #350

Address

Wellington, FL 33414

City/State and Zip Code

help@Alliedpetsupply.com

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

For further information concerning this matter, please call:

help@alliedpetsupply.com

Name of Person

at ( 561 ) 460-4060

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

\$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
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 Florida.*

1. Name of the limited liability company: Allied Pet Supply LLC
2. (a) 125 S. STATE ROAD 7  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
SUITE 104 - #350  
Wellington, FL ~~33411~~ 33414
- (b) \_\_\_\_\_  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
\_\_\_\_\_  
\_\_\_\_\_
3. 08/07/2019 Date of filing/registration in Florida
4. L19000201165 Document number

5. (a) Eric Rodriguez  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

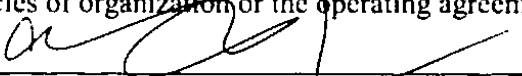
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
125 S. STATE ROAD 7 SUITE 104 - #350  
Wellington, FL 33414

- (b) Registered Agents Inc.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:


7901 4th St N  
NEW Registered Office Address:  
STE 300  
St. Petersburg, FL 33702

FILED  
2019 OCT -9 PM 3:46  
TALLAHASSEE, FLORIDA

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.

 Eric Rodriguez  
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 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.*

 Bill Havre - Assistant Secretary  
Signature of Registered Agent