L19000 261399

•							
(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
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COVER LETTER

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TO:	Registration Section Division of Corporations		
SUBJ	BRANDT Discovery & Innovation	ı, LLC	
001		ame of Limited	Liability Company
Dear S	iir or Madam:		
The er	closed Registered Agent/Registered O	ffice Change a	nd fee(s) are submitted for filing.
Please	return all correspondence concerning	this matter to t	ne following:
Emily	B. Cour		
_	Name of Person		
BRAN	TO		
	Firm/Company		
2935 \$. Koke Mill Rd.		
	Address		
Spring	field, H. 62711		
	City/State and Zip Code		
abbie.i	mulkins@brandt.co		
1	E-mail address: (to be used for future a	nnual report no	stification)
For fu	ther information concerning this matte	er, please call:	
Abbie	Mulkins	217 at (547-5859
	Name of Person	\	Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following	ng amount:	
	■ \$25 Filing Fee	۵	\$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.

2. (a)			(b)			
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing a	iddress of limited liability company: MAY BE POST OFFICE BOX)		
	2935 S. Koke Mill Rd.		2935 S. Koke Mill	ke Mill Rd.		
	Springfield, II. 62711		Springfield, IL 62	711		
	10/17/2019		L19000261399			
3.	Date of filing/registration in Florida	4.	Docum	nent number		
5. (a)	BRANDT, Inc.					
(b)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	Registered Office Address (MUST BE FLORIDA STREE	<u></u>				
	1216 Old Hopewell Rd.					
	Tampa	33619				
	Tampa	FL		/- - - - -		
	BRANDT, Inc.			V		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			2.5		
						
	NEW Registered Office Address:			_1		
	100 N. Tampa, Suite 3575					
	Tampa	FL_33602				
hange gent v vas/wo	imited liability company is not organized under the or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	laws of th he registe liability o s of the li	red office and the bu ompany, it is hereby nited liability compa	isiness office of the registered confirmed that the change(s)		
	Klustl	R.	Lee Allen			
Signa	ture of a member or authorized representative of a member		Printed	or typed name of signee		
! herei rovisi he obl	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple- igations of my position as registered agent as provic tly reflect a change in the registered office address.	gree to ac te perform led for in	t in this capacity. I jance of my duties, c Chapter 605, F.S. (further agree to comply with the md I am familiar with and accep Dr. if this document is being filed Tr. I'll with		

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 F1LING FEE: \$25.00

Signature of Registered Agent