

L20 000 113 024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

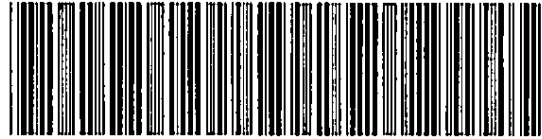
(Business Entity Name)

(Document Number)

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JULY 21 10:00 AM  
JULY 21 10:00 AM  
JULY 21 10:00 AM

Call  
5/21/20

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Mass Salvage 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:

Joseph F. Massaro III  
Name of Person

Mass Salvage LLC  
Firm/Company

979 se 159th terrace  
Address

Silver Springs FL 34488  
City/State and Zip Code

mojocycleparts@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph F. Massaro III at (352) 454 9460  
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 amount:

☐ \$25 Filing Fee

☒ \$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.*

1. Name of the limited liability company: Mass Salvage LLC
2. (a) 979 se 159th terrace (b) 979 se 159th terrace  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

Silver Springs FL 34488

Silver Springs FL 34488

3. April 27, 2020 4. L20000113024  
Date of filing/registration in Florida Document number

5. (a) Joseph F Joseph III  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

979 se 159th terrace  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Silver Springs, FL 34488

- (b) Joseph F. Massaro III  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

979 se 159th terrace  
**NEW** Registered Office Address:

Silver Springs, FL 34488

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.

Joseph F. Massaro III  
Signature of a member or authorized representative of a member

Joseph F. Massaro III  
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the 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.

Joseph F. Massaro III  
Signature of Registered Agent

2020 MAY -4 PM 4:23  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA