

h20 000135127

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

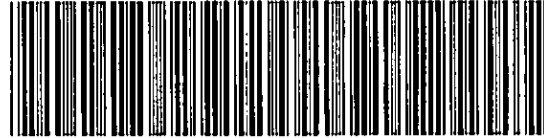
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
DEC 29 2021

Office Use Only



600377931676

12/13/21-- 01025--005 **25.00

FILED
2021 DEC 13 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TEK-EL, 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:

Neil Braslow

Name of Person

Braslow Legal

Firm/Company

110 Little Oak Lane

Address

Altamonte Springs, FL 32714

City/State and Zip Code

neil@braslowlegal.com

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

For further information concerning this matter, please call:

Neil Braslow

929

400-7844

at (_____) _____

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

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) 1228 AUBURN LAKES DR ROCKLEDGE, FL 32955 (b) 1228 AUBURN LAKES DR ROCKLEDGE, FL 32955
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

05/19/2020	L20000135127
3. <u> Date of filing/registration in Florida </u>	4. <u> Document number </u>

5. (a) HADEN, ROBERT E, III
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1228 AUBURN LAKES DR ROCKLEDGE, FL 32955

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

_____, FL _____

(b) Neil Braslow

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

110 Little Oak Lane
NEW Registered Office Address:
 Altamonte Springs, FL 32714

FILED
2021 DEC 13 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FL 32310

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.

	Neil Braslow
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 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.

Signature of Registered Agent