## L20000314371

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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September 22, 2021

ASHLEY KEI KOLLECTIONS LLC 2532 CAVENDER CREEK ROAD MINNEOLA, FL 34715

SUBJECT: ASHLEY KEI KOLLECTIONS LLC

Ref. Number: L20000314371

We have received your document for ASHLEY KEI KOLLECTIONS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 621A00022950

—Yasemin Y Sulker — Regulatory Specialist III

www.sunbiz.org

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: AShry Kei Name of Lim	KOIN CHONS 11C
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Ashley Fulcher Name of Person	
Ashley Kei Kollection Firm/Company	<u>u7</u>
2532 Cavencles cree Address	<u>tro</u> l
Minneola, FL 3471. City/State and Zip Code	5
E-mail address: (to be used for future annual repor	(Om t notification)
For further information concerning this matter, please ca	all:
178hley Fulcher at (	407) 4040111 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	: Airrady paid (see letter)
□ \$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.	Na	me of the limited liability company: AShley 164 Kolfections LC
2.	(a)	Principal office address of limited liability company:  Mailing address of limited liability company:
		Principal office address of limited liability company:  (Note; MUST BE STREET ADDRESS)  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		2532 Cavencher creek rd 2532 Cavencher creek r
		minneola, FL 34715 minneola, FL 34715
3.		Date of filing/registration in Florida  4. Document number
	(a)	Begistered agents enc
э.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
		دے
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
		7901 4th St N Ste 300
		St. Petershurg, H. 33702 5 1
	(b)	Ashley Fulcher
	(-)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
		, W
		NEW Registered Office Address:
		2532 cavencler creek rel
		migneria FL 34715
ch ag wa	ange ent v is/we	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cles of organization or the operating agreement of the limited liability company.
		ashitul Ashky Fulcher
pr the to	ovisi e obl mere	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been I in writing of this change.

Signature of Registered Agent