

120 000 371697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

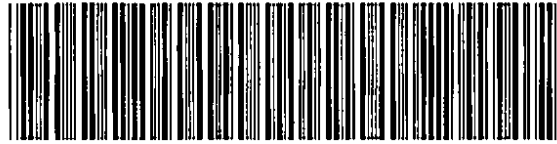
(Business Entity Name)

(Document Number)

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S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ET&L 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:

HAVRE, BILL

Name of Person

Registered Agent Inc.

Firm/Company

'901 4TH ST N STE300

Address

T. PETERSBURG, FL 33702

City/State and Zip Code

fo@elitetransportandlogistics.com

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

or further information concerning this matter, please call:

in Allen _____ at (⁷²⁷ _____) ⁸⁰⁹6734
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: ET&L LLC
2. (a) 7901 4TH ST N STE300ST. PETERSBURG, FL 33702
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
- (b) 7901 4TH ST N STE300ST. PETERSBURG, FL 33702
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 11/25/2020 Date of filing/registration in Florida
4. L20000371697 Document number

5. (a) Bill Havre
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
7901 4TH ST N STE 300
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

ST. PETERSBURG, FL 33702

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

Registered Agents, Inc.
NEW Registered Office Address:
7901 4TH ST N STE 300
7901 4TH ST N STE 300, FL 33702

he limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the
nge or changes are made, the Florida street address of the registered office and the business office of the registered
nt will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
s/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
articles of organization or the operating agreement of the limited liability company.

 Ronald Allen
Signature of a member or authorized representative of a member Printed or typed name of signee

*hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the
visions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept
obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed
erely reflect a change in the registered office address, I hereby confirm that the limited liability company has been
ied in writing of this change.*

Bill Havre
Signature of Registered Agent