

h21 000073682

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

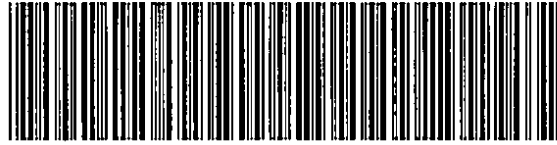
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200391510122

07/25/22 --01001--005 ++\$5.00

STATE OF MASSACHUSETTS
DEPT. OF REVENUE

2022 DEC -5 AM 8:35

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Living in Purpose 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:

John M Boggs

Name of Person

Firm/Company

6717 Bonnie Bay Cir N

Address

Pinellas Park, FL 33781

City/State and Zip Code

boggsjohnm@gmail.com

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

For further information concerning this matter, please call:

John M Boggs

Name of Person

at (304) 972-8383

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 18, 2022

J. MATTHEW BOGGS
6717 BONNIE BAY CIR N
PINELLAS PARK, FL 33781

SUBJECT: LIVING IN PURPOSE, LLC
Ref. Number: L21000073682

We have received your document for LIVING IN PURPOSE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 122A00023341

DEC - 5 2022

**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: Living in Purpose LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

6717 Bonnie Bay Cir N

Pinellas Park, FL 33781

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

6717 Bonnie Bay Cir N

Pinellas Park, FL 33781

02/06/2021

L21000073682

3. Date of filing/registration in Florida 4. Document number

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

John M Boggs

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

539 82nd Ave. N.

St. Petersburg, FL 33702

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

John M Boggs

NEW Registered Office Address:

6717 Bonnie Bay Cir. N.

Pinellas Park, FL 33781

FILED
2022 DEC -5 AM 8:35
TALLAHASSEE, FL
SUBSTITUTION

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.

Megan Boggs

Signature of a member or authorized representative of a member

Megan S. Boggs

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.

[Signature]
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00