L21000134329

(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.				





500415203185

09/08/23--01010--006 **25.00

123 OCT 16 PH 4: 21

JOHN W. WEST III SAWYER OAKS PROFESSIONAL PARK 5602 MARQUESAS CIRCLE, SUITE 212 SARASOTA, FLORIDA 34233



TELEPHONE 941-953-9600 FACSIMILE 941-953-9677 JWEST@JOHNWESTIII.COM WWW.JOHNWESTIII.COM ALSO ADMITTED IN D.C.

October 12, 2023

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

Re: FRAME OF REFERENCE COACHING, LLC

Dear Sir/Madam:

Enclosed please find a Statement of Change of Registered Office for Limited Liability Company. (Also enclosed is your letter dated October 5, 2023). If any further information is needed, please contact me.

Sincerely,

John W. West III

JWW/tmh enclosures

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	FRAME OF REFERENCE COACHING,	LLC		
	Name of Limited Liability Company			
Dear S	ir or Madam:			
The en	closed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.		
Please	return all correspondence concerning this ma	atter to the following:		
ТАММ	Y FEATHERSTONE			
	Name of Person			
	Firm/Company			
5577 PA	ALMER CIRCE, UNIT 202			
	Address			
LAKEW	VOOD RANCH, FL 34211			
	City/State and Zip Code			
TLF159	1@gmail.com			
E-	mail address: (to be used for future annual re	eport notification)		
For furt	her information concerning this matter, pleas	se call:		
TAMM	Y FEATHERSTONE	941 993-0313		
	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	unt:		
	■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		

INHS18 (2/14)



October 5, 2023

JOHN WEST, PLLC SAWYER OAKS PROFESSIONAL PARK 5602 MARQUESAS CIRCLE, SUITE 212 SARASOTA, FL 34233

SUBJECT: FRAME OF REFERENCE COACHING, LLC

Ref. Number: L21000134329

We have received your document for FRAME OF REFERENCE COACHING, 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):

No document was received only your cover letter. I have enclosed a new form.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Letter Number: 823A00023024

Neysa Culligan Regulatory Specialist III

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. N	ame of the limited liability company: FRAME OF RE	FERENCE CO	ACHING, LLC
2 (a)		(b)	
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	5577 PALMER CIRCLE, UNIT 202		
	LAKEWOOD RANCH, FL 34211		
	03/22/2021	L21	000134329
i,	Date of filing/registration in Florida		Document number
(-)			
. (a)	Registered Agent and Registered Office shown on the records of	the Florida Den	at of State:
	TAMMY FEATHERSTONE	t the Florida Dep	t. of State.
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	8225 ASTORIA CIRCLE	11001110007	
	BRADENTON		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	,, [1	L	
(b)			7888 5 F
()	Enter name of NEW Registered Agent and/or NEW Registered	d Office address	m m
	TAMMY FEATHERSTONE		FILED 2023 OCT 16 PM 4: 21 TALLAHASSEE, FLORID
	NEW Registered Office Address:		——————————————————————————————————————
	5577 PALMER CIRCLE, UNIT 202		
	LAKEWOOD RANCH	34211	
iange gent vy	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or in the case of a Florida limited liable of the case of	registered of ability compa	fice and the business office of the registered ny, it is hereby confirmed that the change(s)
e artic	re authorized by an affirmative vote of the members of the organization or the operating agreement of the	or the timited limited liabili	nability company or as otherwise provided in its company.
- V	eun Sux WA		FEATHERSTONE
Signati	ure of a member of authorized representative of a member	-	Printed or typed name of signee
e obli mere stifted	ny accept the appointment as registered agent and agr p(s) of all statutes relative to the proper and complete gations of my position as registered agent as provided ly reflect a change in the registered office address, I have your properties of the change of the	ree to act in th performance d jor in Chapt hereby confirt	is capacity. I further agree to comply with the of my duties, and I am familiar with and accep er 605, F.S. Or. if this document is being filea n that the limited liability company has been
Sighatur	e of Registered Agent		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00