

Division of Corporations

L22000024357

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : URS AGENTS LLC
Account Number : I20150000127
Phone : (800)567-4397
Fax Number : (800)567-4398

2024 AUG 20 AM 4:30
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RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC REGISTERED AGENT CHANGE
ADVANCED AGPROTECTION, LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$25.00 |

K. SALY

AUG 21 2024

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ADVANCED AGPROTECTION, 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:

Jeff Dilley

Name of Person

ADVANCED AGPROTECTION, LLC

Firm/Company

P.O. Box 39

Address

Clarksdale MS 38614

City/State and Zip Code

jsd@henke-bufkin.com

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

For further information concerning this matter, please call:

URS AGENTS C/O LAUREN JOHNSON at (800) 567 - 4397
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

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: ADVANCED AGPROTECTION, LLC

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

4629 SUNSET POINTE

DESTIN, FL 32541

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

4211 I-40 W, Suite 101

Amarillo, TX 79106

01/11/2022

L22000024357

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:

REGISTERED AGENTS INC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

7901 4TH ST N STE 300

ST. PETERSBURG, FL 33702

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

URS AGENTS, LLC

NEW Registered Office Address:

3458 LAKESHORE DRIVE

TALLAHASSEE, FL 32312

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.

Robert Gideon

Signature of a member or authorized representative of a member

Robert Gideon

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.

Lauren Johnson

LAUREN JOHNSON, ASST. SECRETARY

Signature of Registered Agent

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