L2300315126

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COVER LETTER

_	stration Section sion of Corporations					
SUBJECT:	Flo Coast Roofing, LLC					
	Name of Limited Liability Company					
Dear Sir or M	Aadam:					
The enclosed	Registered Agent/Registered	Office Change and f	ec(s) are submitted for filing.			
Please return	all correspondence concerning	g this matter to the fo	ollowing:			
Christopher V	Valker					
	Name of Person		_			
F 10 Coast Roo	ofing, LLC					
	Firm/Company		_			
1405 Alaham	bra Crest Drive					
	Address		_			
Ruskin, FL 3.	3570					
 :	City/State and Zip Coc	le	_			
info@flocoas	troofing.com					
E-mail	address: (to be used for future	annual report notific	cation)			
For further in	nformation concerning this mat	ter, please call:				
Christopher V	Valker	386 at (213-2347			
	Name of Person		Area Code & Daytime Telephone Number			
– <u>Mai</u>	ling Address:		Street Address:			
	istration Section		Registration Section			
	ision of Corporations		Division of Corporations			
	. Box 6327		The Centre of Tallahassee			
fall	ahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enc	losed is a check for the follow	ing amount:				
_	25 Filing Fee	-	5 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	405 Alahambra Crest Drive	(same	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ``	, <u></u>	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	Ruskin, FL 33579	-		
1	07/03/2023	-	L230003	215126
-	Date of filing/registration in Florida	4.		Document number
) I	Registered Agent and Registered Office shown on the records of the	e Florid	a Dept. of S	State:
	Registered Office Address (MUST BE FLORIDA STREET AL	ODRES.	<u>S)</u>	
			<u> </u>	
_	Christopher Walker, Mng Mbr			36: RE V
1	Enter name of NEW Registered Agent and/or NEW Registered O	Office ac	<u>ldress</u> :)
	Managing Member			FILE ARY 13
	NEW Registered Office Address:			
	1405 Alahambra Crest Court			ED STATE Y OF STATE YOR STATE YOR STATE YOUR STATE YOU WINDOW
	Ruskin, FL ³	3570		7 ·
e W 'el	nited liability company is not organized under the laws or changes are made, the Florida street address of the re ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of less of organization or the operating agreement of the li	egister ility co the lin mited	ed office ompany, nited liab	and the business office of the registered it is hereby confirmed that the change(solility company or as otherwise provided company.
K Vu	are of a member or authorized representative of a member	-	istopher v	Printed or typed name of signee
sió lig rej	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe gations of my position as registered agent as provided j by reflect a change in the registered office address, I he in writing of this change.	erform för in	ance of n Chapter (ny duties, and I am Jamiliar with and ac 605, F.S. Or, if this document is being 1

Signature of Registered Agent