

**L98000003428**

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

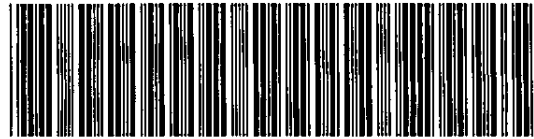
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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TALLAHASSEE, FLORIDA

**K. SALY**  
NOV 22 2016

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ARMSTRONGS RELOCATION FLORIDA, 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:

Bruce K. Cotton

Name of Person

ARMSTRONG RELOCATION

Firm/Company

3101 NW 27th Ave, Suite 111

Address

Pompano Beach, FL 33069

City/State and Zip Code

bcolton@goarmstrong.com

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

For further information concerning this matter, please call:

Bruce Cotton

Name of Person

at ( 954 ) 956-0059

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: Armstrong Relocation, Florida, LLC

2. (a) Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*  
3101 NW 27<sup>th</sup> Ave, Suite 111  
Pompano Beach, FL 33069

(b) Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*  
3101 NW 27<sup>th</sup> Ave, Suite 111  
Pompano Beach, FL 33069

3. 12-29-1998 Date of filing/registration in Florida

4. L 98 000003428 Document number

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

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
1521 W. COPANS ROAD, Suite 109  
Pompano Beach, FL 33064

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

NEW Registered Office Address:  
3101 NW 27<sup>th</sup> Ave, Suite 111  
Pompano Beach, FL 33069

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.

Bruce K Colton  
Signature of a member or authorized representative of a member

BRUCE K. COLTON  
Printed or typed name of signee

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.

Bruce K Colton  
Signature of Registered Agent

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