(Requestor's Name)
(Address)
(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



600352856956

10/06/20--01016--003 **25.00



NOV 13 2020 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations				
Alpha Surveying and Mapping LI SUBJECT:	LC			
	Name of Limited L	iability 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:		
Fred M Franklin				
Name of Person		and the second		
Alpha Surveying and Mapping				
Firm/Company		_		
15237 Locust St				
Address				
Omaha, NE 68116				
City/State and Zip Cod	c			
franklin@alsm96.com				
E-mail address: (to be used for future a	annual report notif	īcation)		
For further information concerning this matt	ter, please call:			
Fred M Franklin	402 at (3801939		
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 followi	ing amount:			
■ \$25 Filing Fee	□ s	☐ \$55 Filing Fee & Certified Copy		

T ,

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.

Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 5237 Locust St maha, NE 68116		Maili	ing address of limited liability company:
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 5237 Locust St		Maili	ing address of limited liability company:
	1.	(\underline{N})	ote: MAY BE POST OFFICE BOX)
maha, NE 68116	•	5237 Locust S	St
		maha, NE 68	
4/2019	MI	9000002434	
Date of filing/registration in Florida	4.	Doo	cument number
egistered Agent and Registered Office shown on the records of	the Florida De	pt. of State:	
red Franklin			
egistered Office Address	ADDRESS)		
70 BIMINI BAY BLVD			20
pollo Beach . FL	33572		2020 OCT
			593 1
			300 5 11
ter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office addres	<u>ss</u> :	
red Franklin			6: 36
EW Registered Office Address:		1311211	
0024 Palermo Cir #202			
ampa . FL	33619		
changes are made, the Florida street address of the be identical. Or, in the case of a Florida limited lis authorized by an affirmative vote of the members of organization or the operating agreement of the of a member or authorized representative of a member accept the appointment as registered agent and agree of all statutes relative to the proper and complete.	registered cability composite limited liab limited liab Fred Frieres	office and the pany, it is her d liability companional little companional little Printer and this capacity of my duties	e business office of the registered reby confirmed that the change(s) impany or as otherwise provided in my. I further agree to comply with the est and I am familiar with and accept
	gistered Office Address (MUST BE FLORIDA STREET) O BIMINI BAY BLVD pollo Beach Florida Beach er name of NEW Registered Agent and/or NEW Registered ed Franklin EW Registered Office Address: 024 Palermo Cir #202 mpa Florida street address of the changes are made, the Florida street address of the be identical. Or, in the case of a Florida limited limithorized by an affirmative vote of the members of organization or the operating agreement of the cost of all statutes relative to the proper and complete for the position as registered agent and agreement of the form of the position as registered agent as provide the proper and complete form of the change in the registered office address. It is that of this change in the registered office address. It is that of this change.	gistered Office Address (MUST BE FLORIDA STREET ADDRESS) 10 BIMINI BAY BLVD 10 BIMINI BAY BLVD 11 Beach FL 33572 12 Beach FL 33572 13 Beach FL 33572 13 Beach FL 33572 14 Beach FL 35619 15 Beach FL 35619 16 Beach FL 35619 17 Beach FL 35619 18 Beach FL 35619 18 Beach FL 35619 19 Beach FL 35619 19 Beach FL 35619 10 Beach FL 3619 10 Beach	gistered Office Address (MUST BE FLORIDA STREET ADDRESS) 10 BIMINI BAY BLVD pollo Beach FL Sassay er name of NEW Registered Agent and/or NEW Registered Office address: ed Franklin We Registered Office Address: 1024 Palermo Cir #202 Impa FL Sassay The diability company is not organized under the laws of the State of Florida changes are made, the Florida street address of the registered office and the be identical. Or, in the case of a Florida limited liability company, it is he authorized by an affirmative vote of the members of the limited liability company of organization or the operating agreement of the limited liability company of a member or authorized representative of a member Privace put the appointment as registered agent and agree to act in this capacity of all statutes relative to the proper and complete performance of my during of my position as registered agent as provided for in Chapter 605. F. They for this change.