

M190000003942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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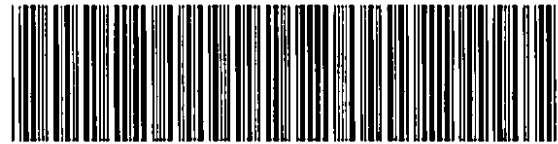
(Business Entity Name)

(Document Number)

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JUN 08 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Levy Holdings Group 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:

Guy Levy
Name of Person

Levy Holdings Group IA LLC
Firm/Company

1512 E 12th Ave Unit 311
Address

Tampa FL 33605
City/State and Zip Code

guy1986levi@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Guy Levy
Name of Person

at (972) 52-953-4437
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

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**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: Levy Holdings Group LLC

2. (a) 1512 E 12th Ave (b) 1512 E 12th Ave

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

Unit 311

Unit 311

Tampa, FL 33605

Tampa FL 33605

3. 3/29/2019
Date of filing/registration in Florida

4. M190000003972
Document number

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

3300 Henderson Blvd Suite 206A

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Tampa , FL 33609

(b) Claudia Jackson

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

1512 E 12th Ave Unit 311

NEW Registered Office Address:

Tampa FL, 33605

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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.

GUY LEVY
Signature of a member or authorized representative of a member

GUY LEVY
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.

Claudia Jackson
Signature of Registered Agent