

P16000097380

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

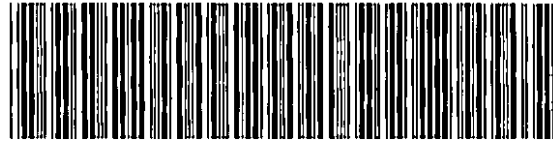
(Business Entity Name)

(Document Number)

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MAR 05 2021

2021 MAR -4 AM 10:31  
OFFICE OF THE CLERK  
TALLAHASSEE, FL  
FILED

**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

35

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

**PICK UP:** 3/4 Glinda

- ☐ **CERTIFIED COPY** \_\_\_\_\_
- xx** **PHOTOCOPY** \_\_\_\_\_
- ☐ **CUS** \_\_\_\_\_
- xx** **FILING** **CORP AMEND** \_\_\_\_\_

**TRACTOR WORLD EQUIPMENT SALES, INC.**

(CORPORATE NAME AND DOCUMENT #)

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(CORPORATE NAME AND DOCUMENT #)

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(CORPORATE NAME AND DOCUMENT #)

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(CORPORATE NAME AND DOCUMENT #)

**CIAL  
TRUCTIONS:**

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Tractor World Equipment Sales, Inc.  
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:**

CJ Bakkes

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Name of Person

Tractor World Equipment Sales, Inc.

---

Firm/Company

3616 Harden Blvd., #316

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Address

Plant City, FL 33566

---

City/State and Zip Code

accounting@elitegunit.net

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

For further information concerning this matter, please call:

CJ Bakkes at (813) 756-6926

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 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: Tractor World Equipment Sales, Inc.

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

2410 E. US Highway 92

Plant City, FL 33566

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

3616 Harden Blvd., #316

Lakeland, FL 33803

12/08/2016

P16000097380

3. Date of filing/registration in Florida

4. Document number

5. (a) Fisher, Tousey, Leas & Ball, P.A.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

501 Riverside Ave., Suite 600

Jacksonville, FL 32202

(b) Coton, Daniel M., Esq.

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

NEW Registered Office Address:

121 N. Collins St.

Plant City, FL 33563

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.

Signature of a member or authorized representative of a member

CJ Bakkes

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.

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00