

L1400000102485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

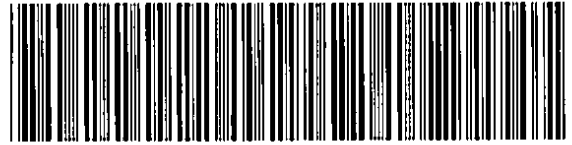
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115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: **March 15, 2023**

Account#: I200000000088

Name: **James Brodbeck**

Reference #: **1931182**

Entity Name: **SERGI VENTURES, LLC**

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: **\$25.00**

Signature: 

**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: SERGI VENTURES, LLC
2. (a) 960 Cape Marco Drive
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Unit 2202
MARCO ISLAND, FL 34145
- (b) 960 Cape Marco Drive
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
Unit 2202
MARCO ISLAND, FL 34145
3. 04/14/2014
Date of filing/registration in Florida
4. L14000062485
Document number
5. (a) WEBSTER, RONALD S
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
979 NORTH COLLIER BLVD
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
MARCO ISLAND, FL 34145
- (b) Cogency Global Inc.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
115 North Calhoun Street, Suite 4
NEW Registered Office Address:
Tallahassee, FL 32301

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SECRETARY
TALLAHASSEE, FL
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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.

Signature of member or authorized representative of a member: [Signature]
Printed or typed name of signee: Dominic M. Seg. - Authorized Agent

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: [Signature]

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