

11/3/23, 10:30 AM

Division of Corporations

L 23000478026

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : UNITED CORPORATE SERVICES, INC.
Account Number : I20140000108
Phone : (914)949-9188
Fax Number : (914)949-9618

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC REGISTERED AGENT CHANGE
10700 VIVALDI COURT LLC

| | |
|-----------------------|---------|
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| Certified Copy | 0 |
| Page Count | 03 |
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Nov - 6 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 10700 VIVALDI COURT 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:

Amy Allen

Name of Person

United Corporate Services, Inc.

Firm/Company

80 State Street, Suite 1101

Address

Albany, NY 12207

City/State and Zip Code

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

For further information concerning this matter, please call:

Name of Person

at (_____) _____

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: 10700 VIVALDI COURT LLC
2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
10700 VIVALDI COURT UNIT 603
MIROMAR LAKES, FL 33913
- (b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
10700 VIVALDI COURT UNIT 603
MIROMAR LAKES, FL 33913
3. 10/18/2023 Date of filing/registration in Florida
4. L23000478026 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
UNITED CORPORATE SERVICES, INC.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
3458 LAKESHORE DR
TALLAHASSEE, FL 32312

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
Gary Laube
NEW Registered Office Address:
10700 Vivaldi Court, Unit 603
MIROMAR LAKES, FL 33913

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.

/s/Gary Laube Gary Laube
Signature of a member or authorized representative of a member 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.

/s/Gary Laube
Signature of Registered Agent