

A990000000861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

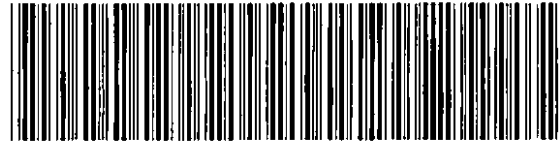
(Business Entity Name)

(Document Number)

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R. HUNT

10/23/23

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Penge Family Limited Partnership

Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A99000000861

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Richard A. Filson

Contact Person

Filson & Penge, PA

Firm/Company

950 S Tamiami Trail, Suite 205

Address

Sarasota, FL 34236

City, State and Zip Code

filsonlawfirm@gmail.com

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

For further information concerning this matter, please call:

Richard A. Filson

at (941) 952-0771

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

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

2023 OCT 23 PM 12:40
DIVISION OF CORPORATIONS
STATE OF FLORIDA

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Penge Family Limited Partnership

Name of Limited Partnership or Limited Liability Limited Partnership

2. 05/27/1999

Date of filing/registration in Florida

3. A99000000861

Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Richard A Filson

Name

2727 S Tamiami Trail, Suite 2

Address

Sarasota, FL 34239

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Richard A Filson

Name

950 S Tamiami Trail, Suite 205

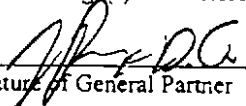
Florida street address (P.O. Box not acceptable)

Sarasota

FL 34236

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.


Signature of General Partner

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.


Signature of Registered Agent

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

2023 OCT 23 PM 12:40

Division of Corporations