

101 000000 5044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

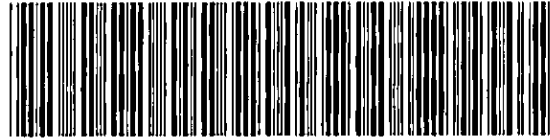
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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20 FEB 14 PM 1:41

MAR 10 2020
C.M. NAR

LAW OFFICE OF ANDREW W. ROSIN, P.A.

1966 Hillview Street
Sarasota, FL 34239

Telephone (941) 359-2604
Facsimile: (941) 366-1252
arosin@rosinlawfirm.com

February 10, 2020

VIA FEDEX

Department of Corporations
PO BOX 6327
Tallahassee, FL 32314

Re: Filings

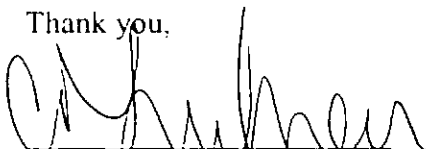
Enclosed please find the following filings:

1. Wipke Industrial Park
2. Tail Plaza Shopping Center
3. Executive House Apartments
4. Schwartz Florida Holdings
5. Schwartz Charlotte Grove Properties
6. Schwartz Charlotte Properties II
7. Schwartz Charlotte Properties

We really appreciate you assisting in these requests.

If you have any questions, please do not hesitate to contact our office.

Thank you,



Chastaty Lineback

Enclosure

20 FEB 14 PM 1:41

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wipke Industrial Park, L.L.C.

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:

Eugene Schwartz

Name of Person

Executive House Apartments

Firm/Company

1000 N. Lockwood Ridge Road

Address

Sarasota, FL 34237

City/State and Zip Code

gsexpt@aol.com

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

For further information concerning this matter, please call:

Mary Fallon

941

366-5229

at (_____) _____

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

RECEIVED
20 FEB 14 PM 1:41

**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: Wipke Industrial Park, L.L.C.
2. (a) Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
1000 N. Lockwood Ridge Road
Sarasota, FL 34237
- (b) Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
1000 N. Lockwood Ridge Road
Sarasota, FL 34237
3. 04/02/2001 Date of filing/registration in Florida
4. L01000005044 Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Jan W. Pitchford
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
240 S. Pineapple Ave., 8th Floor
Sarasota, FL 34236
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
Andrew W. Rosin, P.A.
NEW Registered Office Address:
1966 Hillview Street
Sarasota, FL 34239-3607

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.

X Eugene Schwartz
Signature of a member or authorized representative of a member

Eugene Schwartz

Printed or typed name of signee

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]
Signature of Registered Agent

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