

L02000034646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

A. LUNT

OCT 25 2012

EXAMINER

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2012 OCT 24 PM 2 37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 1, 2012

EDWARD HURT
1311 SW 16TH STREET
GAINESVILLE, FL 32608

SUBJECT: BRADENTON COUNCIL ON AGING, LLC
Ref. Number: L02000034646

We have received your document for BRADENTON COUNCIL ON AGING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 012A00024345

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRADENTON COUNCIL ON AGING, 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:

EDWARD HURT
Name of Person

BRADENTON COUNCIL ON AGING, LLC
Firm/Company

1311 SW 16TH STREET
Address

GAINESVILLE, FL 32608
City/State and Zip Code

ehurt@FLORIDACARE.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edward Hurt at (352) 376-8821 x 245
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: BRADENTON COUNCIL ON AGING, LLC
2. (a) Principal office address of limited liability company: 105 15TH STREET EAST
BRADENTON, FL 34208
(Note: **MUST BE STREET ADDRESS**)

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

12-24-2002
3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State

Registered Agent:

DAVID C. WILLIS, Esq.

Registered Office Address:

300 S. ORANGE AVE
SUITE 1400
ORLANDO, FL 32801

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

DEBORAH L. MOSKOWITZ, ATTY

NEW Registered Office Address:

255 S. ORANGE AVE, 9TH FLOOR

(MUST BE FLORIDA STREET ADDRESS)

ORLANDO, FL 32801

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.

E. W. HURT
Signature of a member or authorized representative of a member

EDWARD HURT, CFO
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 608, 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