

103 0000045981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

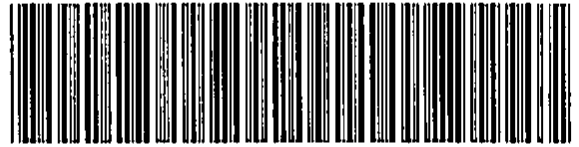
(Business Entity Name)

(Document Number)

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S TALLENT
MAY 07 2019

2019 MAY -2 PM 4:37
SECRETARY OF STATE
TALLAHASSEE, FL

R/A-24



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 15, 2019

ELLEN MEAGHER
CAMBRIDGESHIRE INVESTMENT, LLC
3490 MELISSA CT
PORT CHARLOTTE, FL 33980

SUBJECT: CAMBRIDGESHIRE INVESTMENT, LLC
Ref. Number: L03000045981

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 819A00007571

2019 MAY -2 PM 12:02
RECEIVED
TALLENT, SUSAN
REGULATORY SPECIALIST II

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cambridgeshire 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:

Michael Meagher
Name of Person

Cambridgeshire LLC
Firm/Company

3490 Melissa Ct
Address

Port Charlotte, FL 33980
City/State and Zip Code

ellenmeagher@hotmail.com ✓
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ellen Meagher at (941) 204 7040
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:

a (read) been paid
☐ \$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: Cambridge Shire LLC Investment,

2. (a) Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

3490 Melissa Ct.
Port Charlotte, FL 33980

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

N/A

3. 11/19/2003 Date of filing/registration in Florida

4. 103000045981 Document number

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3490 Melissa Ct
Port Charlotte, FL 33980

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

NEW Registered Office Address:

3490 Melissa Ct
Port Charlotte, FL 33980

FILED
2019 MAY -2 PM 4:37
SECRETARY OF STATE
TALLAHASSEE, FL

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.

Ellen Meagher
Signature of a member or authorized representative of a member

Ellen Meagher
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.

Michael Meagher
Signature of Registered Agent