

LD3000049718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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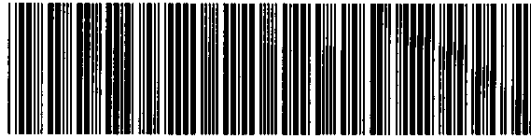
(Business Entity Name)

(Document Number)

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03/25/10--01020--003 \*\*25.00

FILED  
10 MAR 25 PM 1:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

MAR 26 2010

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Erwin/Jones 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:

Raymond R Erwin

Name of Person

Erwin/Jones LLC

Firm/Company

13325 Third St

Address

Ft Myers Florida 33905

City/State and Zip Code

ocalapa@aol.com

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

For further information concerning this matter, please call:

Raymond R Erwin

Name of Person

at ( 239 )

823-5018

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

**FILED**  
10 MAR 25 PM 1:01  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**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: Erwin/Jones LLC

2. (a) Principal office address of limited liability company: \_\_\_\_\_

☒ (Note: **MUST BE STREET ADDRESS**) 13325 Third St  
Ft Myers Florida 33905

(b) Mailing address of limited liability company: \_\_\_\_\_

☒ (Note: **MAY BE POST OFFICE BOX**) 13325 Third St  
Ft Myers Florida 33905

03/22/2010 L030000049718  
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: Raymond R Erwin

Registered Office Address: 13325 Third St  
Ft Myers  
Florida 33905

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

**NEW Registered Agent:** \_\_\_\_\_

**NEW Registered Office Address:**  
**(MUST BE FLORIDA STREET ADDRESS)** \_\_\_\_\_  
\_\_\_\_\_, 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.

Raymond R Erwin  
Signature of a member or authorized representative of a member

Raymond R Erwin  
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 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.*

Raymond R Erwin  
Signature of Registered Agent

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