## L04000068613

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2024 JUL 19 PH 3: 02

## COVER LETTER

Division of Corporations	
Penfield Holdings, LLC SUBJECT:	
	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chan	ige and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Mark Penfield	
Name of Person	<del></del>
Penfield Holdings, LLC	
Firm/Company	
45 Lagoon Street	
Address	<del></del>
North Fort Myers, FL 33903	
City/State and Zip Code	<del></del>
mp45@ earthlink, ne E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	all:
Mark Penfield 23	9 872-9028
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

INHS18 (2/14)

## 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. 1	Name of the limited liability company: Penfield Holding	gs, LLC	
2. (a	)	(b)	
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	45 Lagoon Stret		
	North Fort Myers, FL 33903		
	09/20/2004	1.0	4000068613
3.	Date of filing/registration in Florida	4.	Document number
5. (a	n)		
J. (.	Registered Agent and Registered Office shown on the records of George H. Knott, Esq.	f the Florida De	•
	Registered Office Address (MUST BE FLORIDA STREET		
	1625 Hendry Street, Suite 301	TO PRESON	TALLAHASSEE. FLORIDA
	Fort Myers, F	33901	FILED JUL 19 PH 3
	•	~	SÉE. P
(b	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		
	Enter name of NEW Registered Agent and/or NEW Registered	d Office addre	ORRITO
	Mark Penfield		D'
	NEW Registered Office Address:	<u></u>	<del></del>
	45 Lagoon Street		
	North Fort Myers, FI	_ 33903	
chang agent was/v	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ws of the Sta registered cability comp of the limited	office and the business office of the registered rany, it is hereby confirmed that the change(s) deliability company or as otherwise provided in
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee
provi the ol to me	eby accept the appointment as registered agent and agrisions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I sed in writing of this change.	ree to act in performanc d for in Cha hereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been
Signat	ure of Registered Agent		

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