

104 0000 89 712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

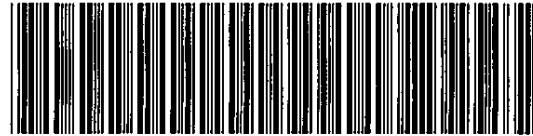
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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789, 707, 671

6-18  
Clerk

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:**

Captain Terrific, 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:

Denise Russell

(Name of Person)

Lamont + Auchampau, PA.

(Firm/Company)

P.O. Box 6026

(Address)

Clearwater, FL 33758

(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Denise Russell

(Name of Person)

at (727) 772-7344

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

*Original  
papers were for  
Corp - not LLC.*

February 17, 2006

DENISE RUSSELL  
PO BOX 6026  
CLEARWATER, FL 33758

SUBJECT: CAPTAIN TERRIFIC LLC  
Ref. Number: L04000089712

We have received your document for CAPTAIN TERRIFIC LLC and your check(s) totaling \$1050.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6097.

Marsha Thomas  
Document Specialist

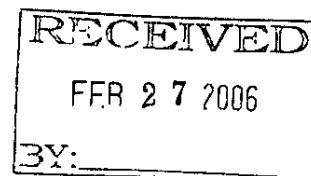
Letter Number: 206A00011504

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*Put part of multiple ck -  
35.00 fee pd - 5/15 25.00  
will req 10. refund.*



**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. The name of the limited liability company is: Captain Terrific, LLC
2. The mailing address of the limited liability company is: 3040 Gulf To Bay Blvd,  
Clearwater, FL 33759

12/6/04  
3. Date of filing/registration in Florida

L04000089712  
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

DAVID A. Lamont, Esquire  
Name  
30750 US 19 N.  
Address  
PALM HARBOR, FL 34684  
City, State and Zip

6. The name and address of the new registered agent and/or office:

DAVID A. Lamont, Esquire  
Name  
3040 Gulf To Bay Blvd.  
Florida street address (P.O. Box NOT acceptable)  
Clearwater FL 33759  
City, State and Zip

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

(Signature of a member or authorized representative of a member)

Frank Mongelliuzzi, MGR  
(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.*

(Signature of Registered Agent)

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