

L05000018781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

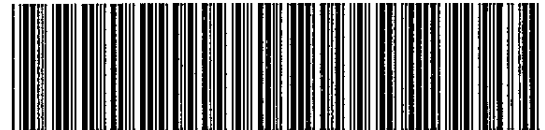
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700055807517

06/30/05--01018--007 **35.00

09/07/05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 SEP -7 PM 2:27

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: M & M SERVICES OF LEHIGH, L. L. C.
(Name of corporation)

DOCUMENT NUMBER: L05000018781 **FEI No.** 20-2726926

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIBEL RIVERO
(Name of contact person)

M & M SERVICES OF LEHIGH, L. L. C.
(Firm/Company)

518 JOEL BLVD
(Address)

LEHIGH ACRES, FL 33972
(City/state and zip code)

For further information concerning this matter, please call:

MARIBEL RIVERO at (239) 369-4909
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

FILED
05 SEP -7 PM 2:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 6, 2005

MARIBEL RIVERO
M & M SERVICES OF LEHIGH, L.L.C.
518 JOEL BLVD.
LEHIGH ACRES, FL 33972

SUBJECT: M & M SERVICES OF LEHIGH, L.L.C.
Ref. Number: L05000018781

We have received your document for M & M SERVICES OF LEHIGH, L.L.C. 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 an LLC. Enclosed is the proper form for your LLC.

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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 105A00044975

FILED
05 SEP - 7 PM 2:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Lehigh Acres, August 30th, 2005

Florida Department of State.
Division of Corporations.
Corporate Records
P. O. Box 6327
Tallahassee, FL 32314

Subject: M & M Services of Lehigh, LLC,
Doc. No. L05000018781

Ref. Your Letter Number 105A00044975 dtd.07/06/2005

Attn. Mr. Lee Rivers, Documents Specialist,

Dear Sir,

In accordance with your instructions you will find enclosed the Statement of Change of Registered Office of registered Agent, or Both For Limited Liability Company. In conjunction with our previous amendment returned for correction, a check in amount of \$35.00 was submitted to you for filing fee. The actual filing fee for this document is \$25.00, therefore, I am entitled to a refund of \$10.00.

If more information is required, please do not hesitate to contact me at my mailing address, or to my telephone No. 239-369-4909.

Sincerely,



* Maribel Rivero

SECRET
TALLAHASSEE, FLORIDA

05 SEP -7 PM 2:27

FILED

**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: M & M SERVICES OF LEHIGH, LLC
2. The mailing address of the limited liability company is : 518 JOEL BLVD, LEHIGH ACRES, FL 33972

02/21/2005 L05000018781
3. Date of filing/registration in Florida 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: GREGORY F. PILLON, Esq.

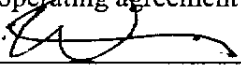
Name
730 NW 40th Avenue
Address
Miami, FL 33126
City, State and Zip

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

MARIBEL RIVERO
Name
518 JOEL BLVD.,
Florida street address (P.O. Box NOT acceptable)
LEHIGH ACRES FL 33972
City, State and Zip

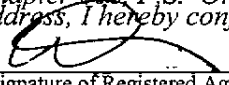
FILED
05 SEP -7 PM 2:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

MARIBEL RIVERO, Owner
(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 of Registered Agent)
Maribel Rivero

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314