

LOS000119252

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OCT 13 2015

Y SULKER



October 9, 2015

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

Re: Canaveral Management, LLC  
Our File: 303018.001

Dear Sir or Madam:

Enclosed herein is a Cover Letter, a signed Statement of Change of Registered Office or Registered Agent or Both For Limited Liability Company, and a check in the amount \$25.00 for filing the Statement of Change for Canaveral Management, LLC. If you have any questions, please do not hesitate to contact me.

Very truly yours,  
FOWLER RODRIGUEZ, LLP

William R. Boeringer, Esq.

WRB:elm  
Enclosures  
L:\Library\303018.001\Division of Corporations 15-1009.docx

COUNSELORS AT LAW

MIAMI • 355 ALHAMBRA CIRCLE, SUITE 801, CORAL GABLES, FLORIDA 33134 • PHONE: (786) 364-8400 • FAX: (786) 364-8401

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Canaveral Management, 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:

Poul V. Jensen

Name of Person

Firm/Company

320 Crystal Pond Avenue

Address

Deland, FL 32720

City/State and Zip Code

pouljensen@bellsouth.net

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

For further information concerning this matter, please call:

Poul V. Jensen

Name of Person

at ( 305 ) 799-4611

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

**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: Canaveral Management, LLC

2. (a) 4139 South Atlantic Avenue, #B209 (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

New Smyrna Beach, FL 32619

3. December 12, 2005 4. L05000119252  
Date of filing/registration in Florida Document number

5. (a) Irick, Stephen CJR.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5915 Ponce De Leon Blvd., Suite 63 Miami, FL 33146

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

\_\_\_\_\_, FL \_\_\_\_\_

(b) Poul V. Jensen  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

320 Crystal Pond Avenue

NEW Registered Office Address:

Deland, FL 32720

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.

Poul V. Jensen  
Signature of a member or authorized representative of a member

POUL VERNER JENSEN  
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.*

Poul V. Jensen  
Signature of Registered Agent

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

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SECRETARY OF STATE