

L06000005216

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 617-6380

From:  
Account Name : GREEN SCHOENFELD & KYLE LLP  
Account Number : I20000000177  
Phone : (239) 936-7200  
Fax Number : (239) 936-7997

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REGISTERED AGENT CHANGE

EQUITY UNION HOLDINGS, LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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Electronic Filing Menu

Corporate Filing Menu

Help

EO9000148840 3

**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: Equity Union Holdings, LLC

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



(Note: **MUST BE STREET ADDRESS**)

1626 NW 19th Street  
Cape Coral, Florida 33993

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



(Note: **MAY BE POST OFFICE BOX**)

1626 NW 19th Street  
Cape Coral, Florida 33993

January 17, 2006

3. Date of filing/registration in Florida

L06000005216

4. Document number

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

Registered Agent:

P.L. Korn

Registered Office Address:

5811 Pelican Bay Boulevard, Suite 209  
Naples, Florida 34108

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

NEW Registered Agent:

Lowell S. Schoenfeld

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

1380 Royal Palm Square Boulevard  
Fort Myers, FL 33919

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.

Lowell S. Schoenfeld

Signature of a member or authorized representative of a member

Lowell S. Schoenfeld

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.

Lowell S. Schoenfeld  
Signature of Registered Agent

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

FILING FEE: \$25.00

EO9000148840 3

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