

206000021055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

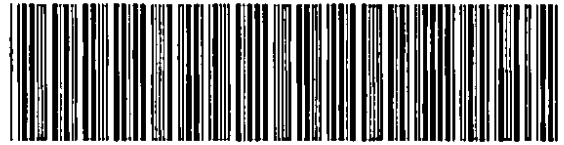
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 02 2019

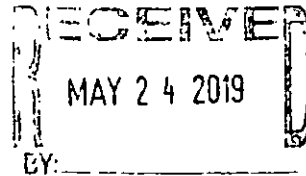
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 16, 2019

MARK JACOB
MANCINI ENTERPRISES, LLC
38600 VAN DYKE STE 100
STERLING HEIGHTS, MI 48312



SUBJECT: MANCINI DEVELOPMENT ECC 2, L.C.
Ref. Number: L06000021055

We have received your document for MANCINI DEVELOPMENT ECC 2, L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 419A00009905

RECEIVED

2019 JUL -1 AM 11:42

ST. J. TALLAHASSEE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MANCINI DEVELOPMENT ECC2, 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:

Mark Jacob
Name of Person

MANCINI ENTERPRISES, LLC
Firm/Company

38600 VAN DYKE, Suite 100
Address

STERLING HEIGHTS, MI 48312
City/State and Zip Code

MSJacob@MANCINI-INC.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Jacob at (586) 739-5210
Name of Person 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: MANCINI DEVELOPMENT ECC 2, LLC

2. (a) _____ (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)

38600 VAN DYKE, Suite 100
STERLING HEIGHTS, MI 48312

3. 02/27/2006 4. LO6000021055
Date of filing/registration in Florida Document number

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
3100 SW 15TH ST.
DAIRFIELD BLVD, FL 33442

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

NEW Registered Office Address:
420 LINCOLN, Suite 408
MIAMI BLVD, FL 33139

FILED
19 JUL - 1 AM 11:00
STATE OF FLORIDA
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] STEVEN MANCINI
Signature of a member or authorized representative of a member 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.

[Signature]
Signature of Registered Agent