

L060000 53052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MAY 10 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BCG Bartow Group 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:

Suzanne Chesser
Name of Person

820 NW 115 Ave
Firm/Company
Address

Plantation FL 33325
City/State and Zip Code

suzannechesser@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suzanne Chesser at 954, 610-3722
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 20, 2017

SUZANNE CHESSE
820 NW 115 AVE
PLANTATION, FL 33325

SUBJECT: BCG BARTOW GROUP, LLC
Ref. Number: L06000053052

We have received your document for BCG BARTOW GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 417A00007727

CEIV
2017 MAY -8 PM 4:42
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: BCG Bartow Group LLC
2. (a) 3845 Carson Ave Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Cooper City FL 33026
- (b) 820 NW 115 Ave Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Plantation FL 33325

3. 5-16-06 Date of filing/registration in Florida
4. 106000053052 Document number
5. (a) ~~Louise Binsten~~ Craig Green
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
3845 Carson Ave 4000 Hollywood Blvd. Ste 4855
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Cooper City FL 33026 Hollywood FL 33021
, FL

- (b) Suzanne Chesser
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
820 NW 115 Ave
NEW Registered Office Address:
Plantation FL 33325
, FL

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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]
Signature of a member or authorized representative of a member

Suzanne Chesser
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 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

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