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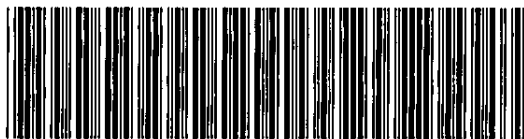
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LOG-70920

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RC Scott Andringa, Esq.
(Name of Corporation)

DOCUMENT NUMBER: _____

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:

Scott Andringa
(Name of Contact Person)

RC Scott Andringa, Esquire LLC
(Firm/Company)

4500 140th Ave No, Ste 119
(Address)

Clearwater FL 33762
(City/State and Zip Code)

For further information concerning this matter, please call:

Scott Andringa at (717) 712 1600
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 17, 2007

SCOTT ANDRINGA ESQ
4500 140TH AVE NO. STE 119
CLEARWATER, FL 33762

SUBJECT: R. SCOTT ANDRINGA, ESQUIRE, LLC
Ref. Number: L06000070920

We have received your document for R. SCOTT ANDRINGA, ESQUIRE, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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 (850) 245-6097.

Marsha Thomas
Regulatory Specialist II

Letter Number: 607A00061084

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 30, 2007

SCOTT ANDRINGA ESQ
4500 140TH AVE NO. STE 119
CLEARWATER, FL 33762

SUBJECT: R. SCOTT ANDRINGA, ESQUIRE, LLC
Ref. Number: L06000070920

We have received your document for R. SCOTT ANDRINGA, ESQUIRE, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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 (850) 245-6097.

Marsha Thomas
Regulatory Specialist II

Letter Number: 907A00063533

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: R Scott Andringa, Esq LLC
2. The mailing address of the limited liability company is:
4500 140th Ave North, Suite 119, Clearwater, FL
33762 LO6 70920
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:

R Scott Andringa, Esq. LLC
Name
39042 US Hwy 19 North
Address
Tarpon Springs, FL 34689
City, State and Zip

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

R Scott Andringa
Name
4500 140th Ave North, Suite 119
Florida street address (P.O. Box NOT acceptable)
Clearwater FL 33762
City, State and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

Scott Andringa
(Signature of a member or authorized representative of a member)

Scott Andringa
(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.

Scott Andringa
(Signature of Registered Agent)

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

FILING FEE: \$25.00