

LA0000081873

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

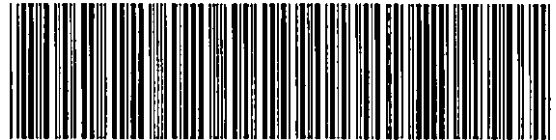
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED

2020 APR 21 PM 2:43

CLERK OF SUPERIOR COURT  
HASTINGS, MINN.

APR 21 2020

S. YOUNG



2020 APR 21 PM 10:57

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 3, 2020

J.W. MAXWELL BARTELS  
ELEMENT LLC  
5591 HALIFAX AVENUE  
FT MYERS, FL 33912

SUBJECT: ELEMENT LLC  
Ref. Number: L06000081873

We have received your document for ELEMENT LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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: 620A00002449

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Element 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:

J W MAXWELL BARTIS  
Name of Person

Element LLC.  
Firm/Company

5591 HALIFAX AVE  
Address

FT MYERS FL 33912  
City/State and Zip Code

MAX@FABS.US  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Bartis at ( 239 ) 229-2952  
Name of Person Area Code & Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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: Element LLC.

2. (a) 5591 HALIFAX AVE (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)

FT MYERS  
FLORIDA 33912

3. 08/2006 4. LD6000081873  
Date of filing/registration in Florida Document number

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

17495 S. TAMiami TR. FT MYERS 33908  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

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

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

JW MAXWELL BARTLEB  
NEW Registered Office Address:

5591 HALIFAX AVE

FT MYERS, FL 33912

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 J Bartels  
Signature of a member or authorized representative of a member

SCOTT J BARTELS  
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.*

JW Maxwell Bartels  
Signature of Registered Agent

FILED  
2020 APR 21 PM 2:43  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA