

**L06000091022**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

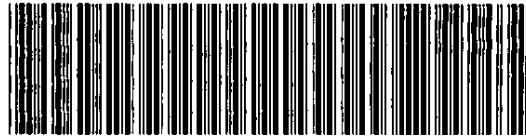
(Business Entity Name)

(Document Number)

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**FILED**  
**2010 SEP 30 PM 12:12**  
**SECRETARY OF STATE**  
**TALLAHASSEE FLORIDA**

**C. LEWIS**

**OCT 1 2010**

**EXAMINER**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 14, 2010

CARLOS E. SUAREZ  
SUAREZ HOME SERVICES & REPAIR, LLC  
1840 8TH ST NE  
NAPLES, FL 34120

SUBJECT: SUAREZ HOME SERVICES & REPAIR, LLC  
Ref. Number: L10000009534

We have received your document for SUAREZ HOME SERVICES & REPAIR, 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 limited liability company. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 510A00021781

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sanchez Arango Landscaping, L.L.C.  
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:

Mr. Rouget Sanchez  
Name of Person

Sanchez Arango Landscaping, L.L.C.  
Firm/Company

8651 Northwest 70th Street  
Address

Miami, Florida 33166  
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rouget Sanchez at ( 305 ) 592-9252  
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 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: Sanchez Arango Landscaping, L.L.C.

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



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

8651 Northwest 70th Street  
Miami, Florida 33166

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



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

09/18/2006

3. Date of filing/registration in Florida

L06000091022

4. Document number

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

Registered Agent:

Michael P. Peterson

Registered Office Address:

8900 SW 117th Avenue, Suite C-104  
Miami, Florida 33176

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

**NEW** Registered Agent:

Rouget Sanchez

**NEW** Registered Office Address:

**(MUST BE FLORIDA STREET ADDRESS)**

8651 Northwest 70th Street

Miami, FL 33166

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 of a member or authorized representative of a member

Rouget Sanchez, Mgrm.

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.*

Signature of Registered Agent

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