

L0600004/23

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

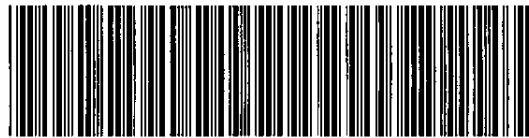
Special Instructions to Filing Officer:

A. LUNT

SEP 29 2009

EXAMINER

Office Use Only



900160979189

09/28/09--01006--024 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 SEP 28 PM 3:12

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Home Delivery Real Estate, 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:

Mike Liguori, CPA, CFP

Name of Person

CPA Financial Alliance, LLC

Firm/Company

801 INTERNATIONAL PKWY. 5TH FLOOR

619 Beville Road

Address

LAKE MARY 32746

Daytona Beach, Florida 32119

City/State and Zip Code

HomeDeliveryRE@aol.com

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

For further information concerning this matter, please call:

Rick Saucier

Name of Person

at (321)

297-3109

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 SEP 28 PM 3:12

FILED

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: Home Delivery Real Estate, LLC

2. (a) Principal office address of limited liability company: 653 Broadoak Loop

☐ (Note: **MUST BE STREET ADDRESS**) Sanford, Florida 32771

(b) Mailing address of limited liability company: same as above

☐ (Note: **MAY BE POST OFFICE BOX**)

6/2007
3. Date of filing/registration in Florida

2514308
4. Document number

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

Registered Agent: The Company Corporation

Registered Office Address: 2711 Centerville Road
Wilmington, Delaware 19808

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

NEW Registered Agent: Mike Liguori, CPA, CFP

NEW Registered Office Address:
(MUST BE FLORIDA STREET ADDRESS)


619 Beville Road 801 International Pkwy.
Daytona Beach, FL 32110
LAKE MARY 32746

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

Rick Saucier
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**