

LO60000118149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

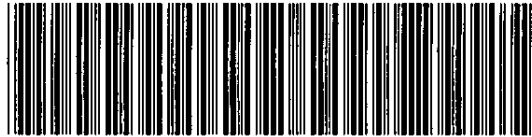
(Business Entity Name)

(Document Number)

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T. CLINE

JUN - 3 2008

EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GLOBAL PATIO & SCREEN, 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:

BEVERLEY GIRARD  
(Name of Person)

Global PATIO & Screen LLC  
(Firm/Company)

11840 METRO PARKWAY  
(Address)

FT MYERS FL 33966  
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

BEVERLEY GIRARD at (239) 274-3103  
(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

May 21, 2008

BEVERLEY GIRARD  
11840 METRO PARKWAY  
FT MYERS, FL 33966

SUBJECT: GLOBAL PATIO & SCREEN, LLC  
Ref. Number: L06000118149

We have received your document for GLOBAL PATIO & SCREEN, 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):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 108A00032205

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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. Name of the limited liability company: Global Patio x Screen LLC

2. (a) Principal office address of limited liability company: 11840 METRO PARKWAY  
FT MYERS FL 33916  
*(Note: MUST BE STREET ADDRESS)*

(b) Mailing address of limited liability company: 11840 METRO PARKWAY  
FT MYERS FL 33916  
*(Note: MAY BE POST OFFICE BOX)*

12-11-2006  
3. Date of filing/registration in Florida

L06000118149  
4. Document number

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

Registered Agent:

PARKER Robert

Registered Office Address:

5410 PARK ROAD #22  
FT MYERS FL 33908

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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

NEW Registered Agent:

CHARLES HURT

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

11840 METRO PARKWAY  
FT MYERS FL 33916

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.

Charles Hurt  
(Signature of a member or authorized representative of a member)

\_\_\_\_\_  
(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.*

Charles Hurt  
(Signature of Registered Agent)

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