

L07000059521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #):

☐ PICK-UP

☐ WAIT

☐ MAIL

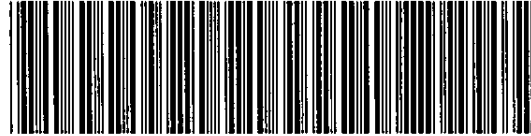
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 14 2015

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** F & N VENTURES, 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:

TINA AARON

Name of Person

F & N VENTURES, LLC.

Firm/Company

5601 POWERLINE ROAD #102-103

Address

FT. LAUDERDALE, FL 33309

City/State and Zip Code

TINA.AARON@STRYKER.COM

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

For further information concerning this matter, please call:

TINA AARON

Name of Person

at ( 954 ) 489-2321 X 237

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

**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: F & N VENTURES, LLC.

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_

Principal office address of limited liability company:

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

5601 POWERLINE ROAD #102-103

FT. LAUDERDALE, FL 33309

Mailing address of limited liability company:

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

5601 POWERLINE ROAD #102-103

FT. LAUDERDALE, FL 33309

06/06/2007

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3. Date of filing/registration in Florida

4. Document number

5. (a) RUSSO, FRANK

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

505 NW 65TH CT

FT. LAUDERDALE, FL 33309

(b) SAME AGENT

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

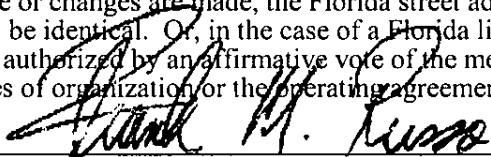
NEW Registered Office Address:

5601 POWERLINE ROAD #102-103

FT. LAUDERDALE, FL 33309

FILED  
2015 AUG 13 P 12:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.



FRANK RUSSO

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 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.

Signature of Registered Agent