

L07000686325

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

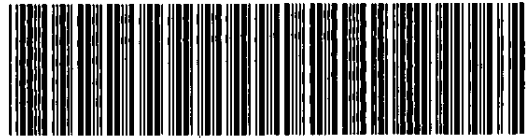
(Business Entity Name)

(Document Number)

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2011 AUG 23 AM 8:10  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE

T. HAMPTON

OCT 8 2011

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SUBSTANTIAL HOLDINGS, 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:

PAUL REGAN

Name of Person

SUBSTANTIAL HOLDINGS, LLC

Firm/Company

11098 BISCAYNE BLVD, SUITE 203

Address

MIAMI, FLORIDA 33161

City/State and Zip Code

paul@substantialholdings.com

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

For further information concerning this matter, please call:

Paul Regan

Name of Person

at ( 305 )

491-8287

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

RECEIVED

11 SEP 28 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

August 29, 2011

HENRY PAUL REGAN  
11098 BISCAYNE BLVD  
STE 203  
MIAMI, FL 33161

SUBJECT: SUBSTANTIAL HOLDINGS LLC  
Ref. Number: L07000080325

We have received your document for SUBSTANTIAL HOLDINGS LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

Please return 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) 245-6855.

Tammy Hampton  
Regulatory Specialist II

Letter Number: 111A00020124

**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: SUBSTANTIAL HOLDINGS, LLC
2. (a) Principal office address of limited liability company: 11098 BISCAYNE BLVD SUITE 203  
MIAMI, FLORIDA 33161
- (Note: MUST BE STREET ADDRESS)
- (b) Mailing address of limited liability company: 11098 BISCAYNE BLVD, SUITE 203  
MIAMI, FLORIDA 33161
- (Note: MAY BE POST OFFICE BOX)
- NOVEMBER 7, 2007 L07000080325
3. Date of filing/registration in Florida 4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- Registered Agent: COLEEN SONNTAG
- Registered Office Address: 3749 D GULF BREEZE PKWY 187  
GULF BREEZE FLORIDA 32563
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
- NEW Registered Agent: PAUL REGAN
- NEW Registered Office Address: 11098 BISCAYNE BLVD, SUITE 203  
(MUST BE FLORIDA STREET ADDRESS) MIAMI, FL 33161

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

PAUL REGAN

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

FILED  
JUG 23 AM 8:10  
TALLAHASSEE, FLORIDA  
DIVISION OF STATE