

L07000080569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C.M.
9/2/14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CJG Key West, 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:

Scott G. Oropeza, CPA
Name of Person

Oropeza + Parks, CPA's
Firm/Company

815 Peacock Plaza
Address

Key West, FL 33040
City/State and Zip Code

Oropeza@oropeza-parks.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Oropeza at (305) 294-1040
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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 8, 2014

SCOTT G. OROPEZA, CPA
OROPEZA & PARKS
815 PEACOCK PLAZA
KEY WEST, FL 33040

SUBJECT: CJG KEY WEST LLC
Ref. Number: L07000080569

We have received your document for CJG KEY WEST 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 incorrect form was submitted. Please submit form pursuant to section 605, LLC.

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) 245-6838.

Cheryl R McNair
Regulatory Specialist II

Letter Number: 514A00017057

RECEIVED
14 AUG 29 AM 11:34
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
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: CJE Key West, LLC
2. (a) 1208 Newton St. Key West, FL 33040 (b) 1208 Newton St. Key West, FL 33040
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 8/2/2007 Date of filing/registration in Florida 4. LO 7000080569 Document number

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

11380 Prosperity Farms Road
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

221E
Palm Beach Gardens, FL 33410

- (b) Scott G. Dropeza, CPA
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Dropeza + Parks, CPA's
NEW Registered Office Address:

815 Peacock Plaza
Key West, FL 33040

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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.

John F. Potter

Signature of a member or authorized representative of a member

JOHN F. POTTER

Printed or typed name of signer

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]
Signature of Registered Agent