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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 2, 2022

TERRA DEL PRADO LLC 12253 NEW BRITTANY BLVD FORT MYERS, FL 33901

SUBJECT: TERRA DEL PRADO, LLC Ref. Number: L07000121958

Our records indicate the registered agent for the above named limited liability company resigned on June 13, 2022 and that the limited liability company currently does not have a registered agent designated.

Chapter 605, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a limited liability company for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named limited liability company 60 days from the date of this letter if a registered agent is not properly designated.

Please designate a new registered agent by doing one of the following: 1) complete the enclosed registered agent designation form, 2) file the current year annual report (if applicable) or 3) file an amended annual report (again, if applicable). Each one of these filings must be submitted with the appropriate filing fee.

If you should need any further information, please contact our office at (850) 245-6823.

Stacy Prather Regulatory Specialist III Division of Corporations

Letter Number: 622A00019706

www.sunbiz.org

Division of Comparations PO ROY 6227 Tallahaggan Florida 22214



## COVER LETTER

TO: **Registration Section Division of Corporations** 

TERRA DEL PRADO LLC SUBJECT:

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:

Bonita Popescu

FAR PROPERTY Management LLC Firm/Company 12557 New Brittany BIVD, Suite3 Address

FORT Myers, FL 33907 City/State and Zip Code

Bonnie & FHRIRDPERTY Management. Com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bonnie Popescu at (239) 437-6356 Area Code & Daytime Telephone Number

Mailing Address: **Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address: **Registration Section Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed is a check for the following amount:

S25 Filing Fee

S55 Filing Fee & Certified Copy

## 1 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.

	Principal office address of limited liability company: ( <i>Note: MUST BE STREET ADDRESS</i> )		_ (t	)N	ailing address of limited ( <u>Note: MAY BE POST</u>	-	• •
	12557 New Britteny Slv	'P_	-	12553	NEW Britta	ny 1	3100
	Suite 3, FORT Myers, FL 339	07-	-	FORT I	NEW Britta Myens, FL 3	3907	L
	7212007 Fune 13, 2022			L070	00121958		
	Date of filing/registration in Florida		4.	I	Document number		
(a)	PAULA WORMUTH						
	Registered Agent and Registered Office shown on the records		: Florida	Dept. of State:	:		
	SIT CREST LAND						
	Registered Office Address (MUST BE FLORIDA STREE	TAD	DRESS	<u> </u>		~	<b>5</b> .3
							1122
	FORT Myers	FL_	33	5707			2022 KUY 28
b)	BONITA Popesar						P
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Of	ffice add	iress:		5	မ္မာ
	12557 New Brittary BIVD, NEW Registered Office Address:	50	uti	3		Ę, <sup>1</sup>	ິ ຕ
	NEW Registered Office Address:		<u></u>				
	FORT MALLE	••	22	907			
	FORT MYERS	۱	<u> </u>	101			
. 1	mited liability company is not organized under the la	aws	of the S	State of Flor	ida, it is hereby conf	irmed t	hat after

Ignature of a member or authorized representative of a member

Bonita Printed or typed name of signee

A 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 Agen

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