

# L68 000026405

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

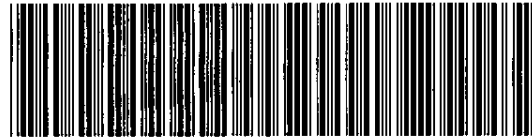
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



600215317896

600215317896  
12/28/11--01046--003 \*\*25.00

FILED  
2011 DEC 28 AM 10:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. HAMPTON

DEC 30 11

EXAMINER

**COVER LETTER:**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Cotuit Properties, 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:

Debra Millinowisch

Name of Person

Quarles & Brady LLP

Firm/Company

300 N. LaSalle St., Suite 4000

Address

Chicago, IL 60654

City/State and Zip Code

p.pometti@comcast.net

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

For further information concerning this matter, please call:

Debra Millinowisch

Name of Person

at ( 312 ) 715-5000

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



300 North LaSalle Street  
Suite 4000  
Chicago, Illinois 60654-3422  
Tel 312.715.5000  
Fax 312.715.5155  
www.quarles.com

**Attorneys at Law in:**  
*Phoenix and Tucson, Arizona  
Naples and Tampa, Florida  
Chicago, Illinois  
Milwaukee and Madison, Wisconsin*

Writer's Direct Dial: 312.715.5012  
E-Mail: [debra.millinowisch@quarles.com](mailto:debra.millinowisch@quarles.com)

December 20, 2011

**VIA U.S. MAIL**

Florida Department of State  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: Cotuit Properties, LLC**

Ladies and Gentlemen:

Enclosed for filing is a Statement of Change of Registered Office or Registered Agent or Both for the above-referenced company. Please file this document with your department as soon as possible and send evidence of the filing to the undersigned in the envelope provided. A check in the amount of \$25.00 is enclosed to cover the filing fees.

Thank you for your assistance in this matter. If you have any questions, please call.

Very truly yours,

QUARLES & BRADY LLP

  
Debra A. Millinowisch  
Paralegal

Enclosures

**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: Cotuit Properties, LLC

2. (a) Principal office address of limited liability company: 2298 Royal Ln.

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

Naples, FL 34112

(b) Mailing address of limited liability company:

P. O. Box 2056

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

Cotuit, MA 02635

3/13/2008

L08000026405

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:

Naples-Lawdock, Inc.

Registered Office Address:

1395 Panther Lane, Suite 300

Naples, FL 34109

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

**NEW Registered Agent:**

Peter Pometti

**NEW Registered Office Address:**

2298 Royal Lane

**(MUST BE FLORIDA STREET ADDRESS)**

Naples, FL 34112

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.

Peter Pometti, Manager  
Signature of a member or authorized representative of a member

Peter Pometti, Manager

Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity and 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.*

Peter Pometti  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00