

LO8000028490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

LO8-28490

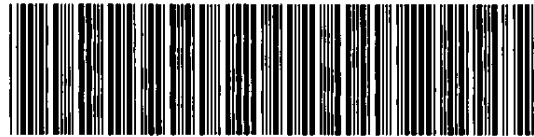
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FILED  
09 JUN 22 AM 11:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S. HAWKES  
MAY 12 2009  
EXAMINER





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 12, 2009

ELIZABETH BRISSET  
5504-D LAKEWOOD CIRCLE  
MARGATE, FL 33063

SUBJECT: TOTS&PANS LLC  
Ref. Number: L08000028490

We have received your document for TOTS&PANS 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):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6955.

Suzanne Hawkes  
Regulatory Specialist II

Letter Number: 309A00016144

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Tots & Pans 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:

Elizabeth BRISSET  
Name of Person

Tots & Pans LLC  
Firm/Company

5504-D Lakewood Cir  
Address

MARGATE, FL 33063  
City/State and Zip Code

✓ EBRISSET@comcast.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elizabeth BRISSET at (954) 917 1597  
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

**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: Tots & Pans LLC

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



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

Elizabeth BRISSET  
5504-D Lakewood Cir  
Margate, FL 33063

(b) Mailing address of limited liability company:



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

03/19/2008

3. Date of filing/registration in Florida

4. Document number

L 0800028

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

Registered Agent:

United States Corporation Agents, Inc

Registered Office Address:

320 S. Flamingo Rd, 347  
Pembroke Pines, FL 33027

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

**NEW Registered Agent:**

Elizabeth BRISSET

**NEW Registered Office Address:**

(**MUST BE FLORIDA STREET ADDRESS**)

5504-D Lakewood Cir  
Margate, FL 33063

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.

Jerry Talcott  
Signature of a member or authorized representative of a member

Jerry Talcott  
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 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.

Elizabeth BRISSET  
Signature of Registered Agent

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