

6/21/23, 9:00 AM

Division of Corporations

**LG800051658**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H23000221095 3)))



H230002210953ABCY

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To:

Division of Corporations  
Fax Number : (850)617-6383

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Account Name : HENDERSON, FRANKLIN, STARNES & HOLT, P.A.  
Account Number : 075410002172  
Phone : (239)344-1100  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: hfra@henlaw.com

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2023 JUN 21 AM 8:09  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT CHANGE  
PAPA CHARLIE, LLC**

Certificate of Status	0
Certified Copy	0
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JUN 22 2023

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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: Papa Charlie, LLC

2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  
2929 Industrial Ave  
Ft. Myers, FL 33901  
5/23/2008

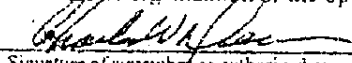
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)  
2929 Industrial Ave  
Ft. Myers, FL 33901  
L08000051658

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:  
John A. Noland  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
1715 Monroe Street  
Fort Myers FL 33901

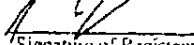
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  
HF Registered Agents, LLC  
NEW Registered Office Address:  
1715 Monroe Street  
Fort Myers FL 33901

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

Charles W. Dean  
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 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.

  
By: Erin E. Houck-Toil, Vice President  
Signature of Registered Agent

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

ENHS18 (2/14)

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