

LD9000029532

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

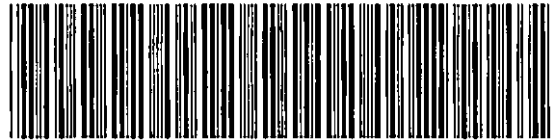
(Business Entity Name)

(Document Number)

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11/05/16--01003--014 **25.00

FILED
2016 NOV 28 F 4:56
T. LEMIEUX

T. LEMIEUX

DEC 04 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sexton Properties of Winter Haven, 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:

Philip Aguilar

Name of Person

Sexton Properties of Winter Haven, LLC

Firm/Company

PO Box 1246

Address

Polk City, FL 33868

City/State and Zip Code

zapu2da@msn.com

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

For further information concerning this matter, please call:

Philip Aguilar at (863) 289-2763
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 19, 2018

PHILIP AGUILAR
P.O. BOX 1246
POLK CITY, FL 33868

SUBJECT: SEXTON PROPERTIES OF WINTER HAVEN, LLC
Ref. Number: L09000029532

We have received your document for SEXTON PROPERTIES OF WINTER HAVEN, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

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) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 618A00023758

RECEIVED
2018 NOV 30 PM 4:26
SECRETARY OF STATE
TALLAHASSEE, FL

**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: Sexton Properties of Winter Haven, LLC

2. (a) Philip Aguilar (b) Philip Aguilar

Principal office address of limited liability company:

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

2756 Lantern Hill Ave

Brandon, FL 33511

Mailing address of limited liability company:

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

1610 Marker Rd

Polk City, FL 33868

1/22/2018

L09000029532

3. Date of filing/registration in Florida

4. Document number

5. (a) Philip Aguilar

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Philip Aguilar

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

101 N. 12th St Unit 200

Tampa, FL 33602-4205

(b) Philip Aguilar

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

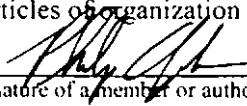
Philip Aguilar

NEW Registered Office Address:

1610 Marker Rd

Polk City, FL 33868

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

Philip Aguilar

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 of Registered Agent

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

FILED
2018 NOV 20 PM 4:56
TALLAHASSEE, FL