L10 0000043268

(Requestor's N	Name)
(Address)	
(Address)	-
(City/State/Zip	/Phone #)
PICK-UP W	AIT MAIL
(Business Ent	ity Name)
(Document Nu	umber)
Certified Copies Cert	ificates of Status
Special Instructions to Filing Office	er:
]





500339892815

01/30/20--01010--028 **25.00

20 JAN 30 PH 3: 1

C Neckleth



EST. 1971

CRAIG R. WOODWARD Board Certained: Real Fatate Law

MARK J. WOODWARD Board Certified: Real Estate Law Board Certified: Condominium and Planned Development Law

ANTHONY P. PIRES, JR. Board Certained City, County, and Local Government Law

J. CHRISTOPHER LOMBARDO Bound Certifical: Marital and Family Law

LENORE T. BRAKEFIELD

ANTHONY J. DIMORA Licused in FL and OH

JENNIFER M. TENNTY
JOSEPH M. COLEMAN
KENNETH V. MUNDY
ZACHARY W. LOMBARDO
CAMERON G. WOODWARD

ROSS E. SCHULMAN

| 39

REPLY TO:

☐ 3200 TAMIAMI TRAIL N. SUITE 200 NAPLES, FL 34103 239-649-6555 239-649-7342 FAX

M 606 BALD EAGLE DRIVE SUITE 500 P.O. BOX ONE MARCO ISLAND. FL 34146 239-394-5161 239-642-6402 FAX

WWW.WPL-LEGAL.COM

WOODWARD, PIRES & LOMBARDO, P.A.

ATTORNEYS AT LAW

January 24, 2020

Via Regular U.S. Mail to:

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

Re: MESB HOLDINGS, LLC

Document Number: L10000043268

Dear Ladies/Gentlemen:

Enclosed are the following documents in regards to the above referenced company.

 Statement of Change of Registered Office or Registered Agent or Both For Limited Liability Company

If you should have any questions or concerns, please feel free to call me at (239) 394-5161. Thank you in advance for you time and assistance with this matter.

Very truly yours.

Anthony J. Dimora, Esq.

CC: A.G.C.C.O 200 S. Orange Ave, Suite 2300 Orlando, FL 32801

AJD/nr Enclosures as noted

COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations					
SUBJ	MESB HOLDINGS, LLC		20			
		Name of Limited Liability Company				
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Offi	ice Change and	fee(s) are submitted for filing.			
Please	return all correspondence concerning this	is matter to the	following:			
Antho	ony J. Dimora, Esq.					
	Name of Person					
Wood	dward, Pires & Lombardo, P.A.					
	Firm/Company		_			
606 E	Bald Eagle Drive, Suite 500					
	Address					
Marc	o Island, Florida 34145					
	City/State and Zip Code		_			
adim	ora@wpl-legal.com					
Ī	-mail address: (to be used for future ann	ual report notif	ication)			
For fu	rther information concerning this matter,	please call:				
Antho	ony J. Dimora	239	394-5161			
	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	Reg Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 llahassee, Florida 32314			
	Enclosed is a check for the following	amount:				
	2 \$25 Filing Fee	□ \$5	5 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 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.

	of the limited liability company: MESB HOL	DINGS, LLC	
2. (a) 18	01 GULF SHORE BLVD., NORTH		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
#	803 - SANCERRE		
N	IAPLES, FLORIDA 34102		
04	1/22/2010	L100	000043268
3.	Date of filing/registration in Florida	4.	Document number
5. (a) A.	.G.C.CO.		
	gistered Agent and Registered Office shown on the records of	of the Florida Dept.	of State:
20	00 S ORANGE AVE		20
Re	egistered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	نيا الله الله الله الله الله الله الله ال
S	STE 2300		A 30
0	RLANDO I	_L_32801	
(b) AN	NTHONY J. DIMORA, ESQ.		20 Jan 30 PH 3: 15
	ter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office address:	
V	/OODWARD, PIRES & LOMBARDO, P.A	٨.	
NE NE	EW Registered Office Address:	-	
60	06 BALD EAGLE DRIVE, SUITE 500		
M	IARCO ISLAND	_{-L} 34145	

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.

Bernard Y. Breslin
Printed or typed name of signee

Signature of Registered Agent

Signature of a member or authorized representative of a member