

L10000010521d

(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:

L. SELLERS

OCT 14 2011

EXAMINER

Office Use Only



100212222101

09/26/11--01029--025 **35.00

FILING CANCELLED
RETURNED CHECK

FILED
11 OCT 13 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fennell Enterprises 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:

Clay Fennell
Name of Person

Fennell Enterprises LLC
Firm/Company

6631 Waverly St.
Address

Youngstown FL 32466
City/State and Zip Code

Fennell/clay@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Clay Fennell at (850) 832-2396
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

September 27, 2011

CLAY FENNEL
6631 WAVERLY STREET
YOUNGSTOWN, FL 32466

SUBJECT: FENNEL ENTERPRISES LLC
Ref. Number: L10000105266

We have received your document for FENNEL ENTERPRISES 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):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 111A00022292

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: Fennell Enterprises LLC

2. (a) Principal office address of limited liability company: 6631 Waverly St.

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

Youngstown Fl.
32466

(b) Mailing address of limited liability company:

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

6631 Waverly St.
Youngstown Fl.
32466

10-8-2010
3. Date of filing/registration in Florida

L10000105266
4. Document number

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

Registered Agent:

United States Corp. Agents Inc.

Registered Office Address:

13302 Winding Oaks Blvd. Ste A
Tampa Fl.
33612

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

NEW Registered Agent:

Clay Fennell

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

6631 Waverly St.
Youngstown Fl.
FL 32466

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.

Clay Fennell
Signature of a member or authorized representative of a member

Clay Fennell
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.

Clay Fennell
Signature of Registered Agent

FILED
OCT 13 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILING CANCELLED
RETURNED CHECK

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

FILING FEE: \$25.00