

400000 127707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

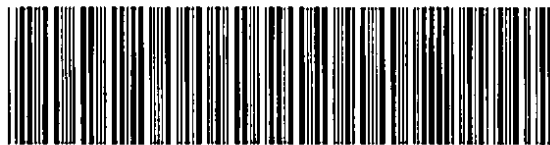
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

1-4-19

Office Use Only



600322076356

12/18/18--01020--021 **25.00

LT
1-30-19

FILED
2019 JAN 14 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LCM Engineering, PLLC

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:

Tree Teresa Ann Tietsoort

Name of Person

LCM Engineering, PLLC

Firm/Company

5294 Summerlin Commons Way, Suite #1201

Address

Fort Myers, Florida 33907

City/State and Zip Code

Tree@LCM.com

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

For further information concerning this matter, please call:

Tree Tietsoort

Name of Person

at (239)

590-0263

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

January 7, 2019

TREE TERESA ANN TIETSORT
LCM ENGINEERING, PLLC
5294 SUMMERLIN COMMONS WAY., SUITE 1201
FORT MYERS, FL 33907

SUBJECT: LCM ENGINEERING, PLLC
Ref. Number: L10000121707

We have received your document for LCM ENGINEERING, PLLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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) 245-6900.

Stacy Prather
Regulatory Specialist III

Letter Number: 619A00000370

1-11-19
*Sorry for the error. Attached I
have copy of Canceled Check for \$25.00.
I have signed where needed.
Thank you.*

**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: LCM Engineering, PLLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

5294 Summerlin Commons Way, Suite 1201

5294 Summerlin Commons Way, Suite 1201

Fort Myers, Florida 33907

Fort Myers, Florida 33907

11/23/2010

L10000121707

3. _____ Date of filing/registration in Florida 4. _____ Document number

5. (a) Midlam, Lewis C.

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

5294 Summerlin Commons Way, Suite 1202

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Fort Myers, FL 33907

(b) Tree Teresa A. Tietsoet

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

5294 Summerlin Commons Way, Suite 1201

NEW Registered Office Address:

Fort Myers, FL 33907

FILED
2019 JAN 14 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FL

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.

Tree Teresa A. Tietsoet
Signature of a member or authorized representative of a member

TREE TERESA ANN TIETSOET
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.

Tree Teresa A. Tietsoet
Signature of Registered Agent