

L11000 120011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

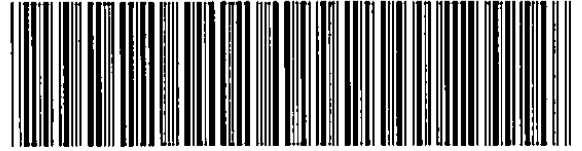
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800346368058

06/18/20--01006 -010 ♦♦25

S TAI 15  
AUG 04 2020

R/A-CH

2020 JUN 18 PM 5:20

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 5377 McIntosh 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:

Michael Evanoff  
Name of Person

5377 McIntosh, LLC  
Firm/Company

5355 McIntosh Rd., Unit F  
Address

Sarasota, FL 34233  
City/State and Zip Code

mike@eviesonline.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

X [Signature] at ( 941 ) 320-476  
Name of Person Area Code & Daytime Telephone Number

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
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 F*

1. Name of the limited liability company: 53TI McIntosh, LLC

2. (a) 5355 McIntosh Rd., Unit F (b) 5355 McIntosh Rd., U

Principal office address of limited liability company:

Mailing address of limited liability company

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

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

Sarasota, FL 34233

Sarasota, FL 3423

3. 10.20.2011  
Date of filing/registration in Florida

4. L11000120011  
Document number

5. (a) Thomas C Tyler, Jr., PA  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

735 E Venice Avenue

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Venice, FL 34285

FL

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

5355 McIntosh Rd., Unit F

**NEW Registered Office Address:**

Sarasota, FL 34233

FL

2020 JUN 18 PM 5:20

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that all 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 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

Michael Evanoff  
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 understand 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