

L11 000123705

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

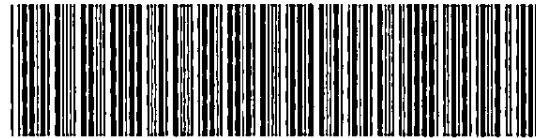
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500357057685

01/13/21--01011--007 **25.00

FILED
2021 JAN 13 PM 2:46
CLERK OF STATE
OF FLORIDA

FEB 19 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Naples Electric 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:

Luigi "Louis" Gencarelli

Name of Person

Naples Electric LLC

Firm/Company

4451 Gulf Shore Blvd. N. - Apt#306

Address

Naples, FL 34103

City/State and Zip Code

lgencarelli@napleselectricllc.com

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

For further information concerning this matter, please call:

Luigi "Louis" Gencarelli

at (239)

304-6100

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 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: Naples Electric LLC

2. (a) 1820 20TH AVENUE NE
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
NAPLES, FL 34120

(b) 1200 GOODLETTE ROAD N. - 8622
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
NAPLES, FL 34101

3. 10-31-2011 Date of filing/registration in Florida

4. L11000123705 Document number

5. (a) D'ONOFRIO, MICHAEL R
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1415 PANTHER LANE
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
STE 328
NAPLES, FL 34109

(b) Luigi "Louis" Gencarelli
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
4451 Gulf Shore Blvd. N.
NEW Registered Office Address:
Apt#306
Naples, FL 34103

2021. 11. 13 PM 2:46
DIVISION OF CORPORATIONS
TALLAHASSEE, FL
ED

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.

Luigi Gencarelli
Signature of a member or authorized representative of a member

Luigi Gencarelli

Printed or typed name of signee

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.

Luigi Gencarelli
Signature of Registered Agent