

LI1000144202

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

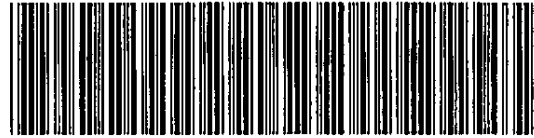
(Business Entity Name)

(Document Number)

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16 DEC -9 AM 9:41

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BIRMINGHAM, ALA.

DEC 12 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Airport Pulling Orange Blossom, 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:

Danielle Shainbrown
Name of Person

McGuire Development
Firm/Company

560 Delaware Avenue, Suite 300
Address

Buffalo, NY 14202
City/State and Zip Code

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

For further information concerning this matter, please call:

Danielle Shainbrown at (716) 829-1977
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

November 16, 2016

HAROLD J WEBRE
COLEMAN YOVANOVICH & KOESTER
4001 TAMiami TRAIL N, STE 300
NAPLES, FL 34103

SUBJECT: AIRPORT PULLING ORANGE BLOSSOM, LLC
Ref. Number: L11000144202

RECEIVED
2016 DEC -9 PM 3:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for AIRPORT PULLING ORANGE BLOSSOM, 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 LLC. 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) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 016A00024631

FILED
SECRETARY OF STATE
2016 DEC -9 AM 9:41

**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: Airport Pulling Orange Blossom, LLC

2. (a) _____
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

7501 Airport Pulling Rd. N.
Naples, FL 34109

(b) _____
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

560 Delaware Ave, Ste. 400
Buffalo, NY 14202

3. 12/27/2011
Date of filing/registration in Florida

4. L11000144202
Document number

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

Incorporating Services, Ltd.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1540 Glenway Drive
Tallahassee, FL 32301

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

Harold J. Webre, Esq. c/o Coleman Yovanovitch & Koester, P.A.
NEW Registered Office Address:
4001 Tamiami Trail N., Suite 300
Naples, FL 34103

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.

X F. James McGuire
Signature of a member or authorized representative of a member

F. James McGuire, its manager
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.

[Signature]
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00