

L12000005101

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

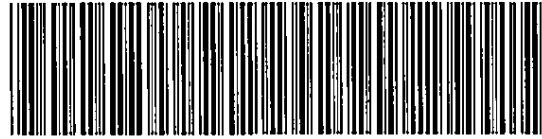
(Document Number)

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Wrong Form

Office Use Only



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08/30/18--01014--007 \*\*\$5.00

2018 SEP 17 PM 1:23  
SECRETARY OF STATE  
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7:13 PM

M. MILLIGAN

SEP 26 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 5, 2018

THERESA F. FERNANDEZ  
1080 CENTRAL LLC  
704 GOODLETTE RD N, STE 240  
NAPLES, FL 34102

SUBJECT: 1080 CENTRAL LLC  
Ref. Number: L12000005101

We have received your document for 1080 CENTRAL 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).

9/12/18 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.

Michelle Milligan  
Senior Section Administrator

Letter Number: 918A00018325

Please see enclosed Cover letter and  
Statement of Change for this Limited Liability Company

Thank You.

Theresa F. Fernandez

9-12-18

239-263-6934

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 1080 Central 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 R. Fernandez  
Name of Person

1080 Central LLC  
Firm/Company

5797 Anegada Drive  
Address

Naples, FL 34113  
City/State and Zip Code

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

For further information concerning this matter, please call:

Theresa Fernandez at ( 239 ) 263-6934  
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

**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: 1080 Central LLC
2. (a) 704 Goodlette Road N. (b) 5797 Anegada Drive  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)  
Suite 240 Naples, FL 34113  
Naples, FL 34102  
01/11/2012 L12000005101
3. Date of filing/registration in Florida 4. Document number
5. (a) Michael R. Fernandez  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
145 Central Avenue  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Naples, FL 34102
- (b) Michael R. Fernandez  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
5797 Anegada Drive.  
NEW Registered Office Address:  
Naples, FL 34102

FILED  
2010 SEP 17 PM 1:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

Theresa Fernandez  
Signature of a member or authorized representative of a member

Theresa Fernandez / Managing Member  
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.

Michael R. Fernandez  
Signature of Registered Agent