

L12000070986

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

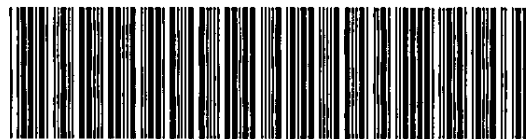
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 13, 2014

AMY MARKOVICH
11121 HARBOUR ESTATES CIRCLE
FT MYERS, FL 33908

SUBJECT: A-LINE GARMENTS, LLC
Ref. Number: L12000070986

We have received your document for A-LINE GARMENTS, 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):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 214A00003297

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A-Line Garments, LLC
Name of Corporation

DOCUMENT NUMBER: L12000070986

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amy MARKOVICH
Name of Contact Person

A-LINE
Firm/Company

11121 HARBOUR ESTATES CIRCLE
Address

FT MYERS FL 33908
City/State and Zip Code

amarkovic@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy Markovich at (239) 851-9993
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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: A-LINE GARMENTS, LLC
2. (a) Principal office address of limited liability company: 11121 HARBOUR ESTATES CIR
(Note: **MUST BE STREET ADDRESS**) FT MYERS, FL 33908
- (b) Mailing address of limited liability company: 11121 Harbour Estates Cir
(Note: **MAY BE POST OFFICE BOX**) FT MYERS FL 33908
- 5/25/2012 L12000070986
3. Date of filing/registration in Florida 4. Document number

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

Registered Agent:

Corporation Service Company

Registered Office Address:

1201 Hays Street

Tallahassee, FL

32301

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

NEW Registered Agent:

Amy MARKOVICH

NEW Registered Office Address:

11121 Harbour Estates Circle

(**MUST BE FLORIDA STREET ADDRESS**)

FT MYERS, FL

33908

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.

Amy B. Markovich
Signature of a member or authorized representative of a member

AMY B. MARKOVICH
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.

Amy B. Markovich
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00