

L12 000078969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

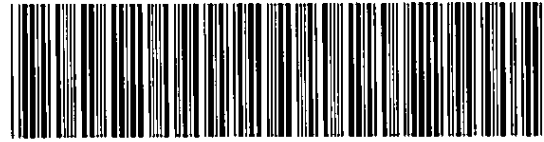
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TOLLOT & C 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:

JACOPO TOLLOT

Name of Person

TOLLOT & C LLC

Firm/Company

342 ANGLER DR, UNIT 1002

Address

GOODLAND FL 34140

City/State and Zip Code

INFO USA @ TOLLOTANDC.COM

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

For further information concerning this matter, please call:

ANNA MARIA PUGIOTTO at (239) 263 5048

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: TOLLOT & C LLC
2. (a) 342 ANGLER DR, UNIT 1002 (b) PO BOX 518  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)  
GOODLAND FL 34140 GOODLAND FL 34140
3. 06/14/2012 4. L12000078969  
Date of filing/registration in Florida Document number
5. (a) JACOPO TOLLOT  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
2670 HORSESHOE DR, N, #203  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
NAPLES, FL 34104
- (b) JACOPO TOLLOT  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
342 ANGLER DR, UNIT 1002  
**NEW Registered Office Address**:  
GOODLAND, FL 34140

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2012 MAY 28 AM 9:04  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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.

JACOPO TOLLOT

Signature of a member or authorized representative of a member

JACOPO TOLLOT

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.

JACOPO TOLLOT

Signature of Registered Agent

05/22/2012