

L120000 85005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

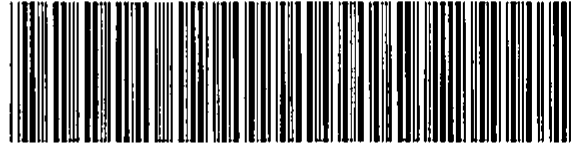
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2020 MAR 23 AM 10:10
U.S. DISTRICT COURT
NORTH DAKOTA

RD/ch8

APR 07 2020

I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Capital Road, 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:

Kevin J Gordon

Name of Person

Capital Road LLC

Firm/Company

1221 Placetas Ave

Address

Coral Gables, FL 33146

City/State and Zip Code

kg@capitalroadllc.com

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

For further information concerning this matter, please call:

Kevin J Gordon

at (305) 753-3988

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: Capital Road, LLC
2. (a) 1221 Placetas Ave Coral Gables, FL 33146
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
- (b) 1221 Placetas Ave Coral Gables, FL 33146
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

3. 06/28/2012 Date of filing/registration in Florida
4. L12000085005 Document number

5. (a) Kevin J Gordon
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
14361 Commerce Way Suite 306
Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

Miami Lakes, FL 33016

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

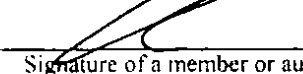
Kevin J Gordon

NEW Registered Office Address:

1221 Placetas Ave

Coral Gables, FL 33146

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.


Signature of a member or authorized representative of a member

Kevin J Gordon
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 of Registered Agent

FILED
2020 MAR 23 AM 10:10
CLERK OF THE COURT
TALLAHASSEE, FLORIDA