L120000091876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

O4OSS cap LLC

Office Use Only

05/21/18--01048--027   **35.00

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JUL 24 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 24, 2018

RUSSELL KLEMM ESQ
1065 MAITLAND CENTER COMMONS BLVD
MAITLAND, FL 32751

SUBJECT: CYPRESS COVE AT SUNTREE CONDOMINIUM RENTALS, LLC
Ref. Number: L12000091876

We have received your document for CYPRESS COVE AT SUNTREE
CONDOMINIUM RENTALS, 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 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.

Brittany M Figueroa
Regulatory Specialist II   Letter Number: 518A00010876
Registration/Qualification Section

Clayton & McCulloh
ATTORNEYS AT LAW
www.clayton-mcculloh.com

July 17, 2018

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

Dear Sir or Madam:

Please process the attached form for a change of Registered Agent for Cypress Cove at Suntree Condominium Rentals, LLC, document number L12000091876 at your earliest opportunity.

On May 17, 2018 we mailed in a registration agent change form for corporations along with check #50989 for $35. As I learned today when calling your office to follow up, LLC requires a different form and the fee is only $25. Please refund us the $10 overpayment by check, payable to Clayton & McCulloh, P.A.

> Our mailing address is:
> **Clayton & McCulloh, P.A.**
> **1065 Maitland Center Commons Blvd.**
> **Maitland, FL 32751**

Please send the refund to the attention of Ken Holmes, Accounting.

If you have any questions or complications, please contact me, David Batan, at <u>dbatan@clayton-mcculloh.com</u> or by phone at 407-875-2655, x151.

Thank you,

David Batan
Coordinator of Client Services

Orlando Office: Maitland		Melbourne Office: Suntree/Viera
The Clayton & McCulloh Building		Baytree Corporate Park
1065 Maitland Center Commons Blvd.		1301 Bedford Drive, Suite 102
Maitland, FL 32751	Toll Free: (888) 793-1486	Melbourne, FL 32940
Phone: (407) 875-2655		Phone: (321) 751-3449
Fax: (407) 660-4989		Fax: (321) 773-9681

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COVER LETTER

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TO: Registration Section
          Division of Corporations

SUBJECT: **CYPRESS COVE AT SUNTREE CONDOMINIUM RENTALS, 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:

Russell E. Klemm, Esq.
                    Name of Person

Clayton & McCulloh, P.A.
                    Firm/Company

1065 Maitland Center Commons Blvd.
                    Address

Maitland, FL 32751
                    City/State and Zip Code

rklemm@clayton-mcculloh.com
                    E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Russell Klemm at (**407**) **875-2655**
          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

INHS18 (2/14)

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: **CYPRESS COVE AT SUNTREE CONDOMINIUM RENTALS, LLC**

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

   7667 N. Wickham Road

   Melbourne, FL 32940

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

   7667 N. Wickham Road

   Melbourne, FL 32940

3. 07-16-2012
   Date of filing/registration in Florida

4. L12000091876
   Document number

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

   GOEDE & ADAMCZYK, PLLC

   Registered Office Address   *(MUST BE FLORIDA STREET ADDRESS)*
   8950 FONTANA DEL SOL WAY, SUITE 100

   NAPLES _____, FL. 34109

   (b) Russell E. Klemm, Esq.
   Enter name of NEW Registered Agent and/or NEW Registered Office address:

   Clayton & McCulloh, P.A.

   NEW Registered Office Address:
   1065 Maitland Center Commons Blvd.

   Maitland _____, FL 32751

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

THOMAS Doherty Pres.
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

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

INHS18 (2/14)