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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : QUARLES & BRADY LLP
Account Number : I20000000067
Phone : (239)434-4922
Fax Number : (239)213-5452

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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TALLAHASSEE FL

**REGISTERED AGENT CHANGE
JEFFREY L. SNOW ASSOCIATES LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$35.00 |

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jeffrey L Snow Associates 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:

Jeffrey L Snow

Name of Person

Jeffrey L Snow Associates LLC

Firm/Company

305 Donora Blvd

Address

Fort Myers Beach, FL 33931

City/State and Zip Code

jsnow5@mc.com

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

For further information concerning this matter, please call:

Jeffrey Snow

at (503)

781-2147

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

TNHS18 (2/14)

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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: Jeffrey L Snow Associates LLC
2. (a) 305 Donora Blvd
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
Ft Myers Beach, FL 33931
- (b) PO Box 6366
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
FT Myers Beach, FL 33932
3. 08/11/2012
Date of filing/registration in Florida
4. L12000105679
Document number
5. (a) Wood, Buckel and Charnichael, PLLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
2150 Goodlette Road North
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Sixth Floor
Naples, FL 34102
- (b) Quarles and Brady, LLP
Enter name of NEW Registered Agent and/or NEW Registered Office address:
1395 Panther Lane
NEW Registered Office Address:
Suite 300
Naples, FL 34109

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 TALLAHASSEE, FL

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

Jeffrey L Snow

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

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