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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 21 2015

J SHIVERS



Yvonne Osgood
Real Estate Paralegal
Premier Executive Center
1415 Panther Lane, Suite 2315
Naples, Florida 34109

Direct: (239) 593-6108 x 5117
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yvonne.osgood@fisherbroyles.com
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August 18, 2015

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

Re: Matthew Brown 05378
Statement of Change-Registration Office/Agent

Hello:

Enclosed please find Statements of Change of Registered Office/Agent for the following along with check no. 1009, in the amount of \$345.00 payable to the Florida Department of State for the required fees:

1. 190 1st Avenue North, LLC
2. 215 3rd Avenue North, LP
3. 1666 4th Street South, LP
4. 1920 6th Street South, LP
5. 1925 6th Street South, LLC
6. 482 13th Avenue South, LP
7. 2010 8th Street South, LP
8. 714 East Lake Drive, LP
9. Spicers-Florida, LLC
10. Linden Naples, Inc.
11. VIV Realty, LLC

If you should any questions regarding the enclosed, please do not hesitate to contact me.
Thank you.

Sincerely,

A handwritten signature in black ink, appearing to be 'Yvonne Osgood', written over the printed name.

Yvonne Osgood
Real Estate Paralegal

/yo
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 190 1ST AVENUE NORTH, LLC, a Florida limited liability company
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:

DANIEL K. WEIDENBRUCH, ESQ.

Name of Person

FISHERBROYLES, LLP

Firm/Company

1415 PANTHER LANE, SUITE 315

Address

NAPLES, FL 34109

City/State and Zip Code

DANIEL.WEIDENBRUCH@FISHERBROYLES.COM

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

For further information concerning this matter, please call:

DANIEL K. WEIDENBRUCH at (239) 593-6108 X 5115
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

05378.0002

**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: 190 1ST AVENUE NORTH, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

2020 8TH STREET SOUTH

NAPLES, FL 34102

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

2020 8TH STREET SOUTH

NAPLES, FL 34102

10/17/2012

L12000132328

3. _____ Date of filing/registration in Florida 4. _____ Document number

5. (a) R&A AGENTS, INC.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

TRIANON CENTRE, THIRD FLOOR

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

850 PARK SHORE DRIVE

NAPLES, FL 34103

(b) FisherBroyle, LLP

Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

1415 PANTHER LANE, SUITE 315

NAPLES, FL 34109

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Daniel Weidenbruch

Signature of a member or authorized representative of a member

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