

L130000010474

(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:

Office Use Only



200271958982

04/23/15--01026--008 **43.75

05/19/15--01026--007 **11.25

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
2015 MAY 15 AM 8:26

RA/RO/chg
@ 5.20.15
CC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Concepts Merchandising 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:

Michael J. Endelman

Name of Person

Concepts Merchandising LLC

Firm/Company

8135 Gerbera Drive Apt. 10309

Address

Naples FL 34113

City/State and Zip Code

mj92250@yahoo.com

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

For further information concerning this matter, please call:

Michael J. Endelman at (862) 703 1026

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 30, 2015

MICHAEL J. ENDELMAN
CONCEPTS MERCHANDISING, LLC
8135 GERBERA DR., APT. 10309
NAPLES, FL 34113

SUBJECT: CONCEPTS MERCHANDISING, LLC
Ref. Number: L13000010474

We have received your document for CONCEPTS MERCHANDISING, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return 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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 415A00008937

RECEIVED
15 MAY 15 AM 11:59
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**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: Concepts Merchandising, LLC

2. (a) Michael J. Endelman (b) Michael J. Endelman
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)
3703 Canopy Circle 3703 Canopy Circle
Naples FL 34113 Naples FL 34113
1-22-13 L 13 0000 10474

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

5. (a) The Company Corporation
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
2711 Centerville Road
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Wilmington DE 19808

FILED
SECRETARY OF CORPORATION
DIVISION OF CORPORATIONS
2015 MAY 15 AM 8:25

(b) Michael J. Endelman / Concepts Merchandising LLC
Enter name of NEW Registered Agent and/or NEW Registered Office address:
3703 Canopy Circle
NEW Registered Office Address:
Naples FL 34120
_____, 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.

Michael J. Endelman
Signature of a member or authorized representative of a member 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.

Michael J. Endelman
Signature of Registered Agent