

L13000013555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

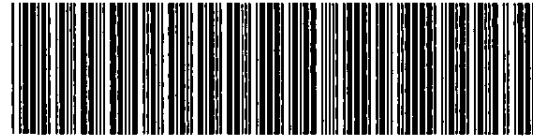
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800244078378

01/31/13--01008--017 **25.00

FILED
13 JAN 31 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 31 2013

B. KOHR

Subject: Corporate Filing - 300244048703
From: limitedonline@dos.state.fl.us (limitedonline@dos.state.fl.us)
To: TALBANITO@YAHOO.COM;
Date: Monday, January 28, 2013 9:31 AM

The Articles of Organization for STORM SHIELD "LLC" were filed electronically on January 28, 2013, effective February 01, 2013, as verified by the letter and authentication number shown below and were assigned document number L13000013555. Please refer to this number whenever corresponding with this office.

The certification you requested is enclosed.

Electronic filing and certification is provided for in section 15.16, Florida Statutes and has the same legal effect as any other filing or certificate.

To maintain "active" status with the Division of Corporations, an annual report must be filed yearly between January 1st and May 1st beginning in the year following the file date or effective date indicated above. If the annual report is not filed by May 1st, a \$400 late fee will be added. It is your responsibility to remember to file your annual report in a timely manner.

A Federal Employer Identification Number (FEI/EIN) will be required when this report is filed. Contact the IRS at 1-800-829-4933 for an SS-4 form or go to www.irs.gov.

Please be aware if the limited liability company's address changes, it is the responsibility of the limited liability to notify this office.

Should you have any questions regarding this matter, please contact this office at the address given below.

Neysa Culligan
Regulatory Specialist II
Registration Section

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

FILED
13 JAN 31 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STORM SHIELD "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:

Margaret A. Albanito

Name of Person

Storm Shield "LLC"

Firm/Company

1012 NW 33rd Place

Address

Cape Coral, Florida 33993

City/State and Zip Code

talbanito@yahoo.com

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

For further information concerning this matter, please call:

Thomas K. Albanito at (239) 222-7701

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

FILED
13 JUN 31 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: Storm Shield "LLC"

2. (a) Principal office address of limited liability company: 1012 NW 33rd Place
Cape Coral, Florida 33993
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 1012 NW 33rd Place
Cape Coral, Florida 33993
(Note: MAY BE POST OFFICE BOX)

02/01/2013

3. Date of filing/registration in Florida

4. Document number 613000013555

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

Registered Agent: Margaret A. Albanito

Registered Office Address: 3769 Acline Road #103
Punta Gorda, Florida 33950

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

NEW Registered Agent: Margaret A. Albanito

NEW Registered Office Address: 1012 NW 33rd Place
(MUST BE FLORIDA STREET ADDRESS)
Cape Coral, FL 33993

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.

Margaret A. Albanito
Signature of a member or authorized representative of a member

Margaret A. Albanito

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 608, 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.

Margaret A. Albanito
Signature of Registered Agent

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