

L13000098707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

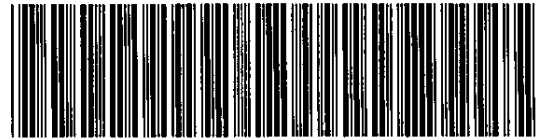
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

MAY 15 2017

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 26, 2017

CHERYL COPIE
14200 ROYAL HARBOUR CT #701
FORT MYERS, FL 33908

SUBJECT: COMPLIABLE SOLUTIONS, LLC
Ref. Number: L13000098707

We have received your document for COMPLIABLE SOLUTIONS, 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):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 717A00008137

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COMPLIABLE SOLUTIONS 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:

Gary J Copie
Name of Person

Compliable Solutions LLC
Firm/Company

14200 Royal Harbour Ct
Unit 701
Fort Myers 71 33908
Address
City/State and Zip Code

ccopie@compliable.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary Copie at (239) 560 8119
Name of Person Area Code & Daytime Telephone Number
Principal

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

**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:

Compliable Solutions LLC

2. (a)

14200 Royal Harbour Ct #701

(b)

same

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

(Note: **MAY BE POST OFFICE BOX**)

Fort Myers, FL 33908

7/11/2013

L1300098707

3.

Date of filing/registration in Florida

4.

Document number

5. (a)

Incorp Services Inc

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

17888 67th Court North Suite 200

Registered Office Address

(**MUST BE FLORIDA STREET ADDRESS**)

Loxahatchee FL 33470

FL

(b)

Gary J Copie

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

14200 Royal Harbour Ct #701

NEW Registered Office Address:

Fort Myers

FL

33908

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

Printed or typed name of signee

CHERI A. COPIE

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