

L13000116993

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/02/15--01005--020 **25.00

FILED
2015 DEC 14 PM 12:40
CLERK OF COURT
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
DEC 17 2015



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

15 DEC 14 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

November 6, 2015

CORNELIUS SANDERS
220 N ZAPATA HWY #11, PMB #1118-A
LAREDO, TX 78043

SUBJECT: C-GROVE LLC
Ref. Number: L13000116993

We have received your document for C-GROVE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

You have listed two addresses, one not in Florida and one in Florida. This not acceptable.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 315A00023560

Corrected an enclosed doc.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C-GROVE 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:

CORNELIUS SANDERS
Name of Person

Firm/Company

220 N. ZAPATA HWY. #11, PMB # 1118-A
Address

LAREDO, TX 78043
City/State and Zip Code

KEES@C-GROVE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CORNELIUS SANDERS at (305) 428-8715
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

**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: C-GROVE LLC

2. (a) 4101 LA PLAYA BLVD
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

MIAMI, FL 33133

(b) CORNELIUS SANDERS
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

220 N. ZAPATA HWY. #11

PMB # 1118-A
LAREDO, TX 78043

3. AUGUST 16, 2013
Date of filing/registration in Florida

4. L13000116993
Document number

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

C-GROVE LLC
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

4101 LA PLAYA BLVD

MIAMI, FL 33133

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TALLAHASSEE, FLORIDA

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

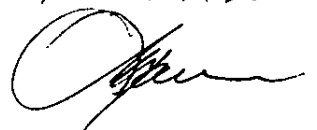
220 N. ZAPATA HWY. #11
PMB # 1118-A
LAREDO, TX 78043

NEW Registered Office Address:

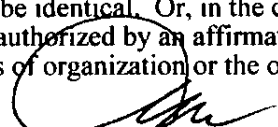
3856 POINCIANA AVE

MIAMI, FL 33133

REGISTERED AGENT
3856 POINCIANA AVE
MIAMI, FL 33133



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

CORNELIUS SANDERS
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