

L13000128306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

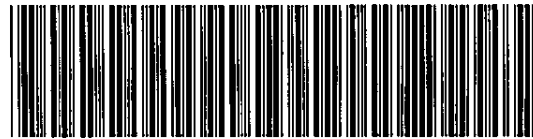
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400291641484

11/09/16--01009--015 **25.00

NOV 10 2016

S. YOUNG

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 NOV -9 PM 2:37

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLORIWEST REALTY GROUP

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:

ELIZABETH STEPHENS

Name of Person

Firm/Company

7617 DONALD ROSS RD W

Address

SARASOTA FL 34240

City/State and Zip Code

EDRACK1@YAHOO.COM

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

For further information concerning this matter, please call:

ELIZABETH STEPHENS

941

266 8209

at ()

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
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 NOV -9 PM 2:37

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:

2607 TANGLEWOOD DRIVE

2. (a)

(b)

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

SARASOTA, FL 34239

L13000128306

3. **Date of filing/registration in Florida**

4.

Document number

ELIZABETH STEPHENS

5. (a)

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

2607 TANGLEWOOD DRIVE

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

SARASOTA 34239
_____, FL

(b)

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

7617 DONALD ROSS RD W

NEW Registered Office Address:

SARASOTA 34240
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.

ELIZABETH STEPHENS

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