

L13000135974

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

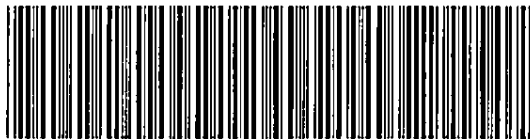
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Wrong form

Office Use Only



600420935796

01/16/24--01028--028 **35.00

ALL REQUESTS FILED

2024 FEB 29 AM 11:21

MAR 20 =

S. PRATHER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 7, 2024

SOUTHERN PRO FENCE & GATE LLC
DUSTIN W. ENOCHS
15760 SE 36TH AVENUE
SUMMERFIELD, FL 34491

SUBJECT: SOUTHERN PRO FENCE & GATE LLC
Ref. Number: W24000021427

We have received your document for SOUTHERN PRO FENCE & GATE 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):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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) 245-6939.

Stacy Prather
Regulatory Specialist III

Letter Number: 224A00002760

RECEIVED

FEB 29 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Southern Pro Fences & Gate 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:

Leigh Ann Thompson
Name of Person

Southern Pro Fences & Gate LLC
Firm Company

15760 SE 36th Avenue
Address

Summerfield FL 34491
City/State and Zip Code

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

For further information concerning this matter, please call:

Leigh Ann Thompson at (352) 245-1775
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Southern Pro Fence Gate LLC

2. (a) 15760 SE 34th Avenue (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

Summerfield FL 34491

3. 9/20/2013 4. L13000135974
Date of filing/registration in Florida Document number

5. (a) United States Corporation Agents, Inc
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

476 Riverside Avenue
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Jacksonville FL 32202

(b) Dustin W Enoch
Enter name of NEW Registered Agent and/or NEW Registered Office address.

15760 SE 34th Avenue
NEW Registered Office Address

Summerfield FL 34491

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]
Signature of a member or authorized representative of a member

Dustin W Enoch PRER
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

2024 FEB 29 AM 11:21
TALLAHASSEE, FL 32314