L13000141367

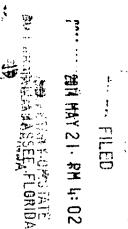
(Re	questor's Name)	
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PICK-UP	TIAW	MAIL
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(Do	cument Number)	
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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DR 5/21/14



May 13, 2014

Roland Espinosa Santiva Cab Company LLC 2210 Camino Del Mar Dr. Sanibel, FL 33957

SUBJECT: SANTIVA CAB COMPANY, LLC

Ref. Number: L13000141367

We have received your document for SANTIVA CAB COMPANY, 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 above entity is a limited liability company and the form submitted is for a Florida corporation. I have enclosed the correct form for you to fill out and return to us.

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) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 714A00010247

COVER LETTER

Division of Corporations	
SUBJECT: Santing Cab Compa	mited Lightlity Company
	mica Elabitity Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Cha	inge and fec(s) are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Roland Espinosa Name of Person	
Santiva Cab Company U	<u>_C</u>
2210 Camino Del Mar DR. Address	
Sanibel, FL, 33957 City/State and Zip Code	
E-mail address: (to be used for future annual rep	ort notification)
For further information concerning this matter, please	call:
Roland Espinosa at (235) 472-0151 Area Code & Daytime Telephone Numbe
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 amou	nt:
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

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.

l. Nai	ame of the limited liability company: <u>Santiva</u> Ca	16 Co	mfa n	y LLC	· · · · · · · · · · · · · · · · · · ·		
2. (a)	2210 Comino Del Mar Da Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	(54) Ma	ME) illing address of Note: MAY I	of limited liab BE POST OF	ility cor	mpany: 2 <i>OX</i>)
	Sanibel FL. 33957	_ Z	2210	Comino	Del Ma	, D	<u> </u>
				bol, FL			
			L/30	00014	1367	<u> </u>	
3.	Date of filing/registration in Florida 4	! .	Ε	Ocument n	ımber		
5. (a)	Corporation Service Company	1			. 14		
, ,	Registered Agent and Registered Office shown on the records of the Fl	lorida Dept	. of State:			23	
	1201 Hays St					=	
	1201 Hoys St Registered Office Address (MUST BE FLORIDA STREET ADDI	RESS)	-			A	
	Tallahassce, Fl. 32301				ASSEE, FLORIDA	別川 HAY 21 PM 4:02	FILEO
	, FL					o ⊐K	<u>C</u>
	,				ETA LOR	Ŧ.	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office				E F	02	
	Enter name of NEW Registered Agent and/or NEW Registered Office	ce address	:				
	Roland Espinosa						
	NEW Registered Office Address:						
	2210 Camino Del Mar DR.						
	Sanibel ,FL_	337	57				
the cha agent w was/we the arti	limited liability company is not organized under the laws o ange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabilitiere authorized by an affirmative vote of the members of the ieles of organization or the operating agreement of the limitature of a member or authorized representative of a member	registere ity compa e limited	d office any, it is liability lity comp	and the busi hereby conf company of	ness office irmed that as otherwi	of the the cha se pro	registere inge(s)
provisi the obl to merc	by accept the appointment as registered agent and agree to ions of all statutes relative to the proper and complete perligations of my position as registered agent as provided for ely reflect a change in the registered office address, I here a fin syriting of this change.	to act in the formance in Chapel of the confirmation of the following th	his capac of my do ter 605, m that th	city. I furth aties, and I F.S. Or, if ne limited li	er agree to am familian this docume ability com	complet with a control of the contro	ly with the and accep being filed as been

Signature of Registered Agent