

L14000112872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

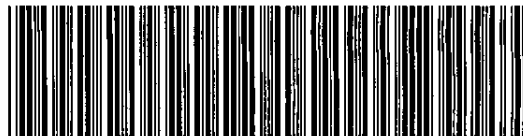
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2015 JUL 10 P 3:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 13 2015

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 19, 2015

WESLEY TODD  
CASE GLIDE, LLC  
701 S. HOWARD AVENUE, SUITE 106-124  
TAMPA, FL 33606

SUBJECT: CASEGLIDE LLC  
Ref. Number: L14000112872

We have received your document for CASEGLIDE 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 CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC (ALSO PLEASE MAKE SURE TO SIGN IT). 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) 245-6051.

Stacey M Mason  
Regulatory Specialist II

Letter Number: 315A00012892

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Case611de, 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:

Wesley Torrel  
Name of Person

Case611de, LLC  
Firm/Company

707 520 S. Armenia Ave. #1229D  
Address

Tampa, FL 33609  
City/State and Zip Code

Wesley@case611de.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wesley Torrel at ( 813 ) 513-5440  
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: Casablick, LLC
2. (a) 5205 Armenia Ave #1229D  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
Tampa, FL 33609
- (b) 5205 Armenia Ave #1229D  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
Tampa, FL 33609
3. July 16, 2014  
Date of filing/registration in Florida
4. 114000112872  
Document number
5. (a) Corporate Creations Network, Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
11380 Prosperity Farms Road #221E  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Palm Beach Gardens, FL 33410
- (b) Wesley Todd  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
5205 Armenia Ave #1229D  
**NEW** Registered Office Address:  
Tampa, FL 33609

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TALLAHASSEE, FLORIDA

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

Wesley Todd  
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]  
Signature of Registered Agent