

L14000 123335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

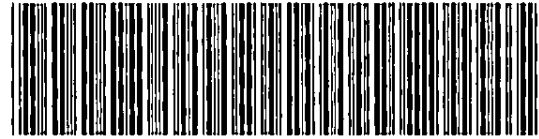
(Business Entity Name)

(Document Number)

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

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CLERK OF SUPERIOR COURT  
JANET L. HARRIS  
1000 EAST 10TH AVENUE  
DENVER, CO 80202

O SIMMONS

MAY 31 2019

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Pointview Avenue, 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:

Chris Leber

Name of Person

Firm/Company

3688 Canopy Cir.

Address

Naples, FL 34120

City/State and Zip Code

leber.8@yahoo.com

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

For further information concerning this matter, please call:

Chris Leber

at (239) 571-5822

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: Pointview Avenue, LLC

2. (a) Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*  
3688 Canopy Cir. Naples, FL 34120

(b) Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*  
3688 Canopy Cir. Naples, FL 34120

08/06/2014

L14000123335

3. Date of filing/registration in Florida 4. Document number

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

DLF Registered Agent Service, LLC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

10181 Six Mile Cypress Parkway, Suite C

Fort Myers, FL 33966

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

Chris Leber

NEW Registered Office Address:

3688 Canopy Cir.

Naples, FL 34120

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.

Chris Leber  
Signature of a member or authorized representative of a member

Chris Leber

Printed or typed name of signer

*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.*

Chris Leber  
Signature of Registered Agent