

L14000 142 032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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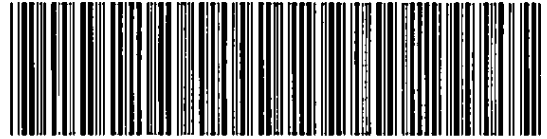
(Business Entity Name)

(Document Number)

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STATE (AA) OF FLA
TALLAHASSEE, FLORIDA

OCT 4 2019

TREASURER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SOMEWHERE IN TIME ANTIQUES EMPORIUM 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:

FRANCES DENIKE
Name of Person

SOMEWHERE IN TIME ANTIQUES EMPORIUM
Firm/Company

150 E. NORTH SHORE AVE
Address

N. FORT MYERS FL 33917
City/State and Zip Code

DABKDOG@BELSOUTH.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL DENIKE at (305) 282-5703
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: SOMEWHERE IN TIME ANTIQUES EMPORIUM
2. (a) 5470 BAYSHORE RD N. FORT MYERS, FL (b) 150 E NORTH SHORE AVE N. FORT MYERS, FL
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

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3. 9-11-2014 Date of filing/registration in Florida 4. L14000142032 Document number

5. (a) UNITED STATES CORPORATION AGENTS INC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5575 S. SEMORAN BLVD SUITE 36

Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)

ORLANDO FL 32822

FL 32822

- (b) SIM CHINARD CPA

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

12611 NEW BRITTANY BLVD

NEW Registered Office Address:

FORT MYERS

FL 33907

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SECRETARY OF STATE
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.

Frances DeNike
Signature of a member or authorized representative of a member

Frances DeNike
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.

James Chinard
Signature of Registered Agent