

L14000189935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

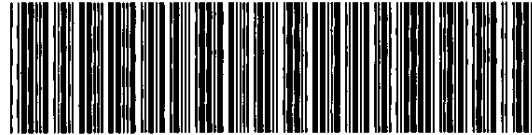
(Business Entity Name)

(Document Number)

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**D. BRUCE
APR 19 2017**



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 4, 2017

PATRICK J LANE
606 BALD EAGLE DR, STE 301
MARCO ISLAND, FL 34145

SUBJECT: MENDOZA BROS. 5, L.L.C.
Ref. Number: L14000189935

We have received your document for MENDOZA BROS. 5, L.L.C., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 517A00006432

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TALLAHASSEE, FLORIDA

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2017 APR 17 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mendoza Bros S 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:

Patrick J Lane
Name of Person

Firm/Company

606 Bald Eagle Dr Ste 301
Address

Marco Island FL 34148
City/State and Zip Code

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

For further information concerning this matter, please call:

Patrick J Lane at (239) 895-6710
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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**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: Mendoza Bros & LLC

2. (a) _____ (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**)

271 Price St 271 Price St
Naples FL 34113 Naples FL 34113

3. _____ 4. L14000189935
Date of filing/registration in Florida Document number

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

277 N Collier Blvd
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Marco Island, FL 34145

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

606 Bald Eagle Dr #301
NEW Registered Office Address:

Marco Island, FL 34145

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.

Sandra Mendoza Sandra Mendoza
Signature of a member or authorized representative of a member 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

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TALLAHASSEE, FLORIDA