

L15000106495

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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D. SCOTT
MAY 16 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

*mailed
Coyen 5/8/17*

MAY 08 2017

May 3, 2017

MICHAEL S DREWS
3603-1 CARDINAL POINT DR
JACKSONVILLE, FL 32257

SUBJECT: NANA'S ANGELS PET SERVICES, LLC
Ref. Number: L15000166495

We have received your document for NANA'S ANGELS PET SERVICES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Dionne M Pijaux
Regulatory Specialist

Letter Number: 217A00008678

RECEIVED
2017 MAY 15 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
17 MAY 15 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Nana's Angels Pet Services, 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:

Michael S. Drews

Name of Person

Drews Law Firm

Firm/Company

3603-1 Cardinal Point Drive

Address

Jacksonville, FL 32257

City/State and Zip Code

mdrews@drewslaw.net

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

For further information concerning this matter, please call:

Michael Drews at (904) 367-8700

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

FILED
MAY 15 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Nana's Angels Pet Services, LLC

2. (a) 5022 Grant Street (b) 5022 Grant Street

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Hollywood, FL 33021

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

Hollywood, FL 33021

03/30/16

L15000166495

3. Date of filing/registration in Florida

4. Document number

5. (a) Michael S. Drews

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

4455 Baymeadows Road

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Suite 102

Jacksonville, FL 32217

(b) Michael S. Drews

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

3603-1 Cardinal Point Drive

NEW Registered Office Address:

Jacksonville, FL 32257

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.

Caylin Drews
Signature of a member or authorized representative of a member

Caylin Drews
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.

[Signature]
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

FILED
MAY 15 PM 4:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE