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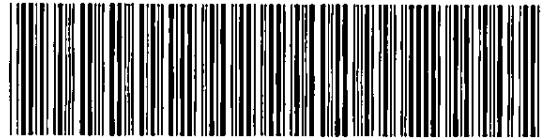
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CHRISTOPHER J. EMA
LAURA G. MACLEAN
ADAN A. AULET, JR.*
BRIAN V. BERGMAN

* ALSO ADMITTED IN ILLINOIS

MACLEAN & EMA P.A.
Attorneys and Counselors at Law

MICHAELA L. ROSELLI
MADELINE R. MACLEAN
RYAN M. PROIETTO

FREDERICK R. MACLEAN, SR.
IN MEMORIAM
ANNE B. MACLEAN, RETIRED

December 17, 2024

SENT VIA FEDEX TRACKING #: 7708 4436 3981

Division of Corporations
Registration Section
The Centre of Tallahassee
2415 N. Monroe Street
Suite 810
Tallahassee, FL 32399

RE: Intellisteel Group, LLC change in Registered Office and Agent

To Whom it May Concern:

On behalf of Adan A. Aulet, Jr. enclosed please find a Cover Letter and Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company. I have included check 41126 in the amount of \$25.00 as required as a filing fee. Should you have any questions regarding this transmittal, please do not hesitate to contact Adan A. Aulet, Jr., Esquire in our office at (954) 785-1900 or our mailing address of 2600 N.E. 14th Street Causeway, Pompano Beach, Florida 33062.

Sincerely,

MacLean and Ema, P.A.



Amy H. Patterson, Legal Assistant to Adan A. Aulet, Jr.
For the Firm
Enclosures as noted.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INTELLISTEEL GROUP, 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:

ADAN A. AULET, JR., ESQ.

Name of Person

MACLEAN AND EMA, P.A.

Firm/Company

2600 N.E. 14TH STREET CAUSEWAY

Address

POMPANO BEACH, FL 33062

City/State and Zip Code

AAULET@MACLEAN-EMA.COM

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

For further information concerning this matter, please call:

ADAN A. AULET, JR., ESQ.

954

785-1900

at ()

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: INTELLISTEEL GROUP, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

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

7815 American Way, Suite 100

Groveland, FL 34736

Mailing address of limited liability company:

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

7815 American Way, Suite 100

Groveland, FL 34736

December 29, 2015

L1600000171

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:

Jeffrey P. Skates

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1028 Lake Sumter Landing

The Villages, FL 32158

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

MacLean and Ema, P.A.

NEW Registered Office Address:

2600 N.E. 14th Street Causeway

Pompano Beach, FL 33062

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.

Stanley Adwell

Signature of a member or authorized representative of a member

STANLEY P. ADWELL, MANAGER

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 of Registered Agent

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