

L16000098369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

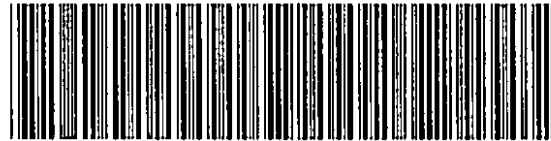
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HALL COUNTY, IOWA

S. WARREN

AUG 08 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 8, 2017

MANUEL DE LA TORRE
4618 JOG ROAD
GREENACRES, FL 33467

SUBJECT: DE LA TORRE BROTHERS LLC
Ref. Number: L16000098369

We have received your document for DE LA TORRE BROTHERS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED PARTNERSHIP - LP, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 717A00011668

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: De LaTorre Brothers 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:

Manuel De LaTorre Jr.
Name of Person

De LaTorre Brothers LLC
Firm/Company

4618 Jog Rd
Address

Greenwood FLORIDA 33467
City/State and Zip Code

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

For further information concerning this matter, please call:

Manuel De LaTorre Jr. at (561) 427-3732
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: De La Torre Brothers LLC

2. (a) 4618 Jog Rd

Principal office address of limited liability company:

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

Green Acres FL 33467

(b) 4618 Jog Rd

Mailing address of limited liability company:

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

Green Acres FL 33467

3. 5/19/2016
Date of filing/registration in Florida

4. L16 0000 98367
Document number

5. (a) Legal INC Corporate Services Inc.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5237 Summerlin Commons
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Suite 100

Fort Myers, FL 33907

(b) De La Torre Brothers LLC / Manuel De La Torre Jr.
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

4618 Jog Rd
NEW Registered Office Address:

Green Acres

Green Acres, FL 33467

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.

[Signature]
Signature of a member or authorized representative of a member

Manuel De La Torre Jr.
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

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