

L16000198505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

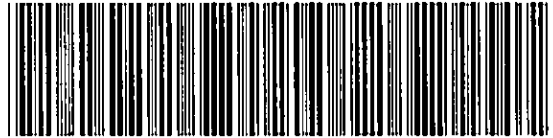
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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New Agent must sign

Office Use Only



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20 JAN 30 PM 6:46

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

RA Change

FEB 03 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CM'z Ventures, 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:

Catherine A. Cole

Name of Person

CM'z Ventures, LLC

Firm/Company

190 Running Deer Trl.

Address

Lake Helen, FL 32744

City/State and Zip Code

cmzvllc@gmail.com

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

For further information concerning this matter, please call:

Catherine A. Cole

Name of Person

at (386) 414-0161

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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DIVISION OF CORPORATIONS
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 14, 2020

CATHERINE A COLE
CM'Z VENTURES, LLC
190 RUNNING DEER TRL
LAKE HELEN, FL 32744

SUBJECT: CM'Z VENTURES, LLC
Ref. Number: L16000198505

We have received your document for CM'Z VENTURES, 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 New Registered Agent must sign the acceptance statement.

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) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 820A00001028

2020 JAN 30 AM 10:12

**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: CM's Ventures, LLC
2. (a) 190 Running Deer Trl.
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Lake Helen, FL 32744
- (b) 190 Running Deer Trl.
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Lake Helen, FL 32744
3. 10/27/2016
Date of filing/registration in Florida
4. LL6660198505
Document number
5. (a) Catherine A. Cole
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
190 Running Deer Trl.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Lake Helen, FL 32744
- (b) Daniel F. Mac Carrick
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
190 Running Deer Trl.
NEW Registered Office Address:
Lake Helen, FL 32744

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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.

C A Cole
Signature of a member or authorized representative of a member

Catherine A. Cole
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.

C A Cole
Signature of Registered Agent