

# L16000221101

\_\_\_\_\_  
(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:

Office Use Only



## 900331384489

07/05/19--01002--028 \*\*25.00

FILED

2019 JUL -5 AM 11:06

SECRET

Y SULKER

JUL 17 2019

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Chop, Chop, Chop, 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:

Thomas C. Bordeau

\_\_\_\_\_  
Name of Person

Chop, Chop, Chop, LLC

\_\_\_\_\_  
Firm/Company

4833 Europa Drive

\_\_\_\_\_  
Address

Naples, FL 34105

\_\_\_\_\_  
City/State and Zip Code

tcogswellbordeau@gmail.com

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

For further information concerning this matter, please call:

Thomas C. Bordeau

at ( 603 )

387-1719

\_\_\_\_\_  
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

