

L17000045791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

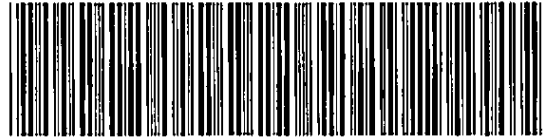
(Business Entity Name)

(Document Number)

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FILED

2019 JAN 28 A 3:29

TALLAHASSEE, FL 32301

1/29/19



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 26, 2018

CARICOM REALTY, LLC
PO BOX 470
OCOOEE, FL 34761

SUBJECT: CARICOM REALTY, LLC
Ref. Number: L17000045791

FILED
2019 JAN 28 A 3:29
TALLAHASSEE, FLORIDA

We have received your document for CARICOM REALTY, 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 CORP, but your entity is a 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.

Dionne M Scott
Regulatory Specialist II

Letter Number: 018A00024057

2019 JAN 28 PM 2:21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cancom Realty, 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:

Mohammed Inshan
Name of Person

Cancom Realty, LLC
Firm/Company

P.O. Box 470
Address

06022, FL 34761
City/State and Zip Code

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

For further information concerning this matter, please call:

Rahem Mohammed at (352) 256-8004
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

*Already sent check for \$35.00.

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2019 JAN 28 A 3:29
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: CANCOM Realty LLC

2. (a) 1943 Pomegranate Ct. (b) P.O. Box 470

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

Ocoee, FL 34761

Ocoee, FL 34761

3. 02/27/17
Date of filing/registration in Florida

4. L-17000045917
Document number

5. (a) AA Ali, CPA
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1322 North Pine Hills Rd.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

ORP
Orlando, FL 32808

(b) Mylika Morton, CPA
Enter name of NEW Registered Agent and/or NEW Registered Office address:

1175 Lakemont Ave.
NEW Registered Office Address:

Apt 107

Orlando, FL 32814

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.

Muhammad Inshan
Signature of a member or authorized representative of a member

MUHAMMAD INSHAN
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.

Muhammad Inshan
Signature of Registered Agent