

L17 0000 64694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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2317 AUG 28 PM 3:33

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AUG 28 2017  
J. HARRIS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Meat Cottage 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:

Alfred Thomas Becker

Name of Person

The Meat Cottage LLC

Firm/Company

16081 Via Solera Circle , Unit 103

Address

Fort Myers / Florida, 33908

City/State and Zip Code

contact@themeatcottage.com

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

For further information concerning this matter, please call:

Alfred Thomas Becker

Name of Person

at ( 941 ) 2649264

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 14, 2017

ALFRED THOMAS BECKER  
16081 VIA SOLERA CIRCLE APT 103  
FORT MYERS, FL 33908

SUBJECT: THE MEAT COTTAGE LLC  
Ref. Number: L17000064694

We have received your document for THE MEAT COTTAGE 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 person designated as registered agent in the document and the person signing as registered agent must be the same.

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 817A00016557

RECEIVED

2017 AUG 28 PM 2:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2017 AUG 28 PM 3:30  
TALLAHASSEE, FLORIDA

2017 AUG 28 PM 3:30

FILED

**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: The Meat Cottage LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

Via Solera Circle, Apt.103

Via Solera Circle, Apt.103

Fort Myers, FL 33908

Fort Myers, FL 33908

03/21/2017

L17000064694

3. Date of filing/registration in Florida 4. Document number

5. (a) Claudia Metzler

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1862 Linnhart Ave.

Fort Myers, FL 33901

(b) Alfred Thomas Becker

Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

16081 Via Solera Circle, Apt.103

Fort Myers, FL 33908

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

Alfred Thomas Becker

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]  
Signature of Registered Agent

(Alfred Thomas Becker)

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