

L1700006925Z

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

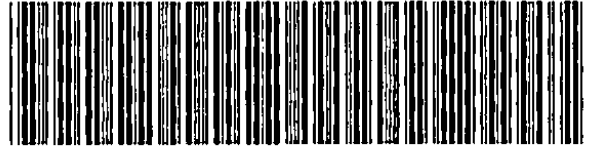
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2020 DEC 18 PM 3:05
COUNTY OF ALBERTA
STATE OF ALBERTA

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DEC 21 2020



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 4, 2020

SEAN HARRINGTON
1712 SE COLONY WAY
JUPITER, FL 33478

SUBJECT: HARRINGTON INVESTMENT CAPITAL LLC
Ref. Number: L17000069282

We have received your document for HARRINGTON INVESTMENT CAPITAL 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 820A00024289

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Harrington Investment Capital, 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:

Sean T Harrington

Name of Person

Harrington Investment Capital, LLC

Firm/Company

1712 SE Colony Way

Address

Jupiter, FL 33478

City/State and Zip Code

Seantlaw@aol.com

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

For further information concerning this matter, please call:

Sean T Harrington

at (561)

400-9849

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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
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: Harrington Investment Capital, 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**)

1712 SE Colony Way

1712 SE Colony Way

Jupiter, FL 33478

Jupiter, FL 33478

March 28, 2017

L17000069282

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

5. (a) Sean T Harrington

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

Sean T Harrington

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

3801 NW 3rd Ave.

Boca Raton, FL 33431

(b) Sean T Harrington

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

Sean T Harrington

NEW Registered Office Address:

1712 SE Colony Way

Jupiter, FL 33478

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that 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 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 of a member or authorized representative of a member

Sean T Harrington
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 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 of Registered Agent

FILED
2020 DEC 18 PM 3:05
SECRETARY OF STATE
TALLAHASSEE, FL