

LITOC 124989

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

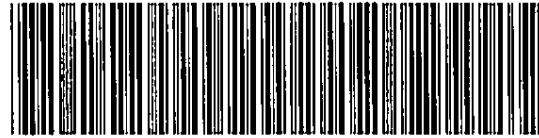
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300319791123

10/19/18--01010--001 **25.00

FILED
18 OCT 19 PM 2:52
RECEIVED
CLERK OF COURT
JANUARY 18, 2019

NOV 06 2018

T SCHROEDER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHORE PATROL, 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:

CHRISTOPHER DAY
Name of Person

SHORE PATROL, LLC
Firm/Company

2830 SURFSIDE BLVD
Address

CAPE CORAL, FL. 33914
City/State and Zip Code

Cday327@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHRIS DAY at (609) 238 8838
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

**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: SHORE PATROL, LLC
2. (a) 2830 SURFSIDE BLVD, CAPE CORAL, FL 33914 (b) 2830 SURFSIDE BLVD, CAPE CORAL, FL 33914
Principal office address of limited liability company: 33914 Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 10/15/18 Date of filing/registration in Florida 4. L17000124989 Document number
5. (a) CHRISTOPHER DAY
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

2830 SURFSIDE BLVD
CAPE CORAL, FL 33914

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Daniel Paradise
NEW Registered Office Address:
134 SE 18th St
Cape Coral, FL 33990

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] CHRISTOPHER DAY
Signature of authorized representative of the limited liability company

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