

L17000156613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

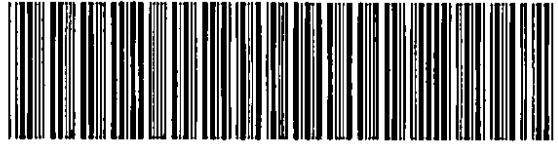
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APR 21 2020
S. YOUNG

2020 APR 20 AM 11:40
AS AGENT OF STATE
DIVISION OF CORPORATIONS
AND BUSINESSES

FILED



Copy

2020 APR 20 PM 1:14

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 24, 2020

MRS. CIGDEM
GLORIUS MARKETPLACE FLORIDA LLC
12647 NEW BRITTANY BLVD
FORT MYERS, FL 33906

SUBJECT: GLORIUS MARKETPLACE FLORIDA LLC
Ref. Number: L17000156613

We have received your document for GLORIUS MARKETPLACE FLORIDA LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, 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) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 620A00006402

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLORIOUS MARKETPLACE FLORIDA 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:

CIGDEM THANHOFFER
Name of Person

PAUL INTERNATIONAL CONSULTANTS
Firm/Company

12647 New Brittany Blvd
Address

Fort Myers, FL 33907
City/State and Zip Code

k.paul@glorious.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cigdem Thanhoffer at (239) 344 99 30
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 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: GLORIOUS MARKETPLACE FLORIDA LLC

2. (a) 12647 New Brittany Blvd
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Fort Myers, FL 33907

(b) 12647 New Brittany Blvd
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

Fort Myers, FL 33907

3. 07/21/2017
Date of filing/registration in Florida

4. L17000156613
Document number

5. (a) Corporation Company of Miami
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

200 South Biscayne Blvd, Suite 4100
Miami, FL 33131

(b) Gideon Tharkoffer c/o Paul International Consultants
Printed name of NEW Registered Agent and/or NEW Registered Office address

12647 New Brittany Blvd
NEW Registered Office Address

Fort Myers, FL 33907

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 of a member or authorized representative of a member:

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.

Signature of Registered Agent

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