

L17000189546

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

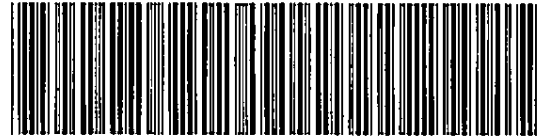
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SECRET
2022 JAN 25 PM 2:58
FBI



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 4, 2021

JUSTIN CROMARTIE
300 E OAKLAND PARK BLVD #288
WILTON MANORS, FL 33334

SUBJECT: AQUASITIONS UNLIMITED, LLC
Ref. Number: L17000189546

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please choose ONLY (1) individual to become the new registered agent.

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.

Querida R Silas
Regulatory Specialist II

Letter Number: 021A00026959

PLEASE CHANGE THE REGISTERED AGENT TO ONLY JUSTIN CROMARTIE

2022 JAN 25 PM 2:54
[Signature]
1/21/22

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Aquasitions Unlimited 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:

Justin Cromartie

Name of Person

Aquasitions Unlimited LLC

Firm/Company

300 E Oakland Park Blvd #288

Address

Wilton Manors, FL 33334

City/State and Zip Code

justin@unitedpropertyteam.com

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

For further information concerning this matter, please call:

Justin Cromartie

954

520-8801

at (_____) _____

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: Aquisitions Unlimited, LLC
2. (a) 300 E Oakland Park Blvd
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
#288
Wilton Manors, FL 33334
- (b) 300 E Oakland Park Blvd
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
#288
Wilton Manors, FL 33334
3. 09/06/2017 Date of filing/registration in Florida
4. 1.17000189546 Document number
5. (a) Spink & Associates, PA
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
9700 Griffin Road
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Cooper City, FL 33328
- (b) Justin Cromartie
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
300 E Oakland Park Blvd
NEW Registered Office Address:
#288
Wilton Manors, FL 33328

FILED
2022 JAN 25 PM 2:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Justin Cromartie

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