

L17000 233832

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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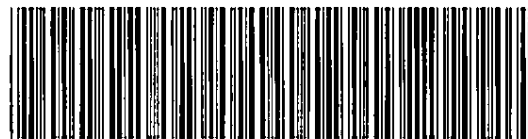
(Business Entity Name)

(Document Number)

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D. SCOTT
DEC 11 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wingate & Wingate Professional Services 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:

Bobby Lee Wingate

Name of Person

Wingate & Wingate Professional Services LLC

Firm/Company

4020 Park St N. Suite 101

Address

St. Petersburg, FL 33709

City/State and Zip Code

bwingate50@gmail.com

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

For further information concerning this matter, please call:

Bobby Lee Wingate

Name of Person

at (360) 241-4187

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

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2017 DEC -5 PM 7:53
TALLAHASSEE, FLORIDA

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: Wingate & Wingate Professional Services LLC

2. (a) 4020 Park St N. (b) 4020 Park St N.

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Suite 101

Suite 101

St Petersburg, FL 33709

St Petersburg, FL 33709

November 13, 2017

L17000233832

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

5. (a) LEGALINC Corporate Services INC / Kyle Lavender

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

5239 Summerlin Commons

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Suite 400

Fort Myers, FL 33907

(b) Bobby Lee Wingate

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

4020 Park St N.

NEW Registered Office Address:

Suite 101

St Petersburg, FL 33709

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.

Bobby Lee Wingate

Signature of a member or authorized representative of a member

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 of Registered Agent