

L17000 263591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

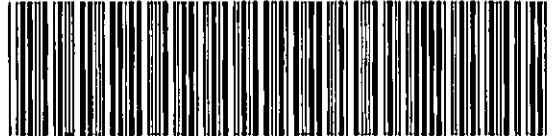
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JLS
12-12-18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WATERWORKS SOCIAL CLUB, 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:

PAUL THOMPSON

Name of Person

WATERWORKS SOCIAL CLUB, LLC

Firm/Company

3279 AMERICAN SADDLER DRIVE

Address

PARK CITY, UT 84060

City/State and Zip Code

pnpncu@gmail.com

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

For further information concerning this matter, please call:

PAUL THOMPSON at (203) 564-3321
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

INHS18 (2/14)

See
envelope
for check \$25

TT 10/11/18

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: WATERWORKS SOCIAL CLUB, LLC
2. (a) 1005 N. ORANGE AVENUE - UNIT B
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
SARASOTA, FL 34236
- (b) 3279 AMERICAN SADDLER DRIVE
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
PARK CITY, UT 84060
3. 12/28/2017
Date of filing/registration in Florida
4. L17000263591
Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
JAY W. BERMAN

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

701 WEBBER STREET #114

SARASOTA, FL 34232

- (b) Kathy B. Harris
Enter name of NEW Registered Agent and/or NEW Registered Office address:
3550 North Moorings Way
Coconut Grove, FL 33133

FL _____

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)

PAUL THOMPSON

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.

Kathy B. Harris
Signature of Registered Agent

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

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE