

L18000000873

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

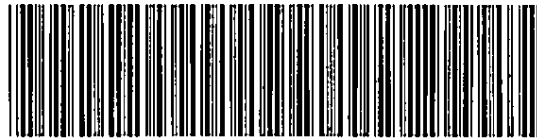
(Business Entity Name)

(Document Number)

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2018 NOV -1 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FL

UTS
11-1-18

2018 OCT 15 AM 9:52



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 23, 2018

Sandra Gutierrez
Granite Renovations Group LLC
807 Sawdust Trail
Kissimmee, FL 34744

SUBJECT: GRANITE RENOVATIONS GROUP LLC
Ref. Number: L18000000873

We have received your document for GRANITE RENOVATIONS GROUP LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

The designation of the registered agent must be at a Florida street address.

If you have any questions concerning the filing of your document, please call (850) 245-6900.

Lyn Shoffstall
Bureau Chief

Letter Number: 118A00021780

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GRANITE RENOVATIONS GROUP
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:

SANDRA GUTIERREZ
Name of Person

GRANITE RENOVATIONS GROUP LLC
Firm/Company

807 SAWDUST TRAIL
Address

KISSIMMEE , FLORIDA , 34744
City/State and Zip Code

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

For further information concerning this matter, please call:

SANDRA GUITIERREZ at (407) 205 3767
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: GRANITE RENOVATIONS GROUP

2. (a) 807 SAWDUST TRAIL (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

KISSIMMEE, FLORIDA 34744

10/30/18

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

5. (a) SANDRA GUITIERREZ

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

807 SAWDUST TRAIL

KISSIMMEE, FL 34744

(b) MARIA CLAUDIA CARDONA

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

NEW Registered Office Address:

517 CARIBBEAN DR

DAVENPORT, FL 33897

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.

Maria Claudia Cardona

Signature of a member or authorized representative of a member

Maria Claudia Cardona

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.

Maria Claudia Cardona
Signature of Registered Agent

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SECRETARY OF STATE