

L180000067847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

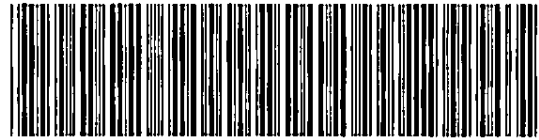
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800372470638

08/07/21--01015--025 \*\*25.00

FILED  
2021 OCT -4 AM 8:45  
SECRETARY OF STATE  
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2021 OCT -4 PM 1:57

September 21, 2021

LOGAN BENZIGER  
PO BOX 921  
EDEGEWATER, FL 32132

SUBJECT: BENZ LAWN & ORNAMENTAL, LLC  
Ref. Number: L18000067847

We have received your document for BENZ LAWN & ORNAMENTAL, LLC and your check(s) totaling \$25.00. 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.

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.

Catherine M Brumbley  
Regulatory Specialist II

Letter Number: 621A00022758

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Benz Lawn & Ornamental, 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:

Logan Benziger

\_\_\_\_\_  
Name of Person

Benz Lawn & Ornamental, LLC

\_\_\_\_\_  
Firm/Company

PO Box 921

\_\_\_\_\_  
Address

Edgewater, FL 32132

\_\_\_\_\_  
City/State and Zip Code

benzlawnornamental@gmail.com

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

For further information concerning this matter, please call:

Logan Benziger

386 314-1396  
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: Benz Lawn & Ornamental, LLC
2. (a) Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
2518 Hibiscus Dr. #201  
Edgewater, FL 32132
- (b) Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
PO Box 921  
Edgewater, FL 32132
3. 03/15/2018 Date of filing/registration in Florida
4. L18000067847 Document number

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

Benziger, Logan

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

18 E. Magnolia Ave.

Port Orange, FL 32127

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Benziger, Logan

NEW Registered Office Address:

2518 Hibiscus Dr. #201

Edgewater, FL 32141

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

Logan Benziger  
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

2021 OCT -4 AM 8:45  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED