

118000071347

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

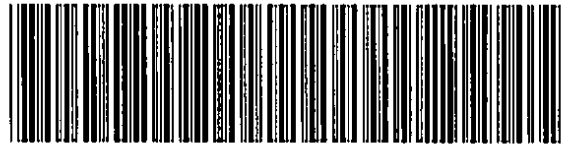
Special Instructions to Filing Officer:

Q. SILAS

JUL 05 2022

6/17/22

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FILED
JUN 17 PM 4:17
SECRETARY OF STATE
TALLAHASSEE, FL



RECEIVED

2022 JUN 17 AM 8:10

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FL

June 4, 2022

CLYDE WILSON
8722 CORVUS DRIVE
LAKE WORTH, FL 33467

SUBJECT: CLYDE C WILSON III LLC
Ref. Number: L18000071347

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s). All pages must be returned in order to file the document.

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: 522A00012551

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Clyde C Wilson III 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:

Clyde Wilson III

Name of Person

Clyde C Wilson III LLC

Firm/Company

8722 Corvus Drive

Address

Lake Worth, FL 33467

City/State and Zip Code

treswilson@me.com

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

For further information concerning this matter, please call:

Clyde Wilson III

917
at ()

821-1475

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: Clyde C Wilson III LLC

2. (a) Clyde C Wilson III LLC Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

8722 Corvus Drive

Lake Worth, FL 33467

03/20/2018

(b) Clyde C Wilson III LLC Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

8722 Corvus Drive

Lake Worth, FL 33467

118000071347

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

5. (a) Legal INC Corporate Services Inc. (RESIGNED)
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Legal INC Corporate Services Inc. (RESIGNED)

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

5237 Summerlin Commons Blvd Suite 400

Fort Myers, FL 33907

(b) Clyde C Wilson III
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Clyde C Wilson III

NEW Registered Office Address:

8722 Corvus Drive

Lake Worth, FL 33467

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.

Clyde C Wilson III
Signature of a member or authorized representative of a member

Clyde C Wilson III
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.

Clyde C Wilson III
Signature of Registered Agent

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TALLAHASSEE, FL