

LI800101774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

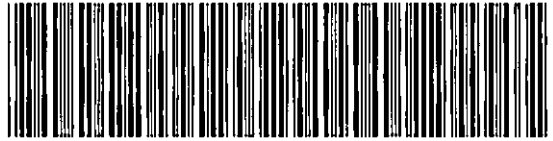
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



600314878656

CHS  
RA

How to Submit: 1. By Mail

FILED  
JUN 25 2018  
2018 JUN 25 PM 3:05  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS & BUSINESSES

N. CAUSSEAU

JUN 25 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Michael Madison & Reese 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:

Lisa Barreca

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

Michael Madison & Reese LLC

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

302 SE Huntington Circle

\_\_\_\_\_  
Address

Port Saint Lucie, FL 34984

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

lisabarreca@gmail.com

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

For further information concerning this matter, please call:

Lisa Barreca

at ( 561 ) 808-3966

\_\_\_\_\_  
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: Michael Madison & Reese LLC

2. (a) 3820 Aspen Leaf Circle Drive (b) 3820 Aspen Leaf Drive

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

Boynton Beach, FL 33436

Boynton Beach, FL 33436

4/23/18

L18000101774

3. Date of filing/registration in Florida

4. Document number

5. (a) Lisa Barreca

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

3820 Aspen Leaf Drive

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

Boynton Beach, FL 33436

(b) Lisa Barreca

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

302 SE Huntington Circle, Pt St Lucie, FL 34984

NEW Registered Office Address:

302 SE Huntington Circle

Port St Lucie, FL 34984

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.

Lisa Barreca  
Signature of a member or authorized representative of a member

Lisa Barreca  
Printed or typed name of signer

*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.*

Lisa Barreca  
Signature of Registered Agent

FILED  
SECTION 605.0116  
JUN 25 PM 3:05  
TALLAHASSEE, FL