L18000 199482

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(Ci	ity/State/Zip/Phor	ne #)				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 9, 2020

CHRISTOPHER S. KLEPKO 3368 WOODS EDGE CIRCLE #101 BONITA SPRINGS, FL 34134

SUBJECT: HARWICK HOMES BUILDING GROUP, LLC

Ref. Number: L18000199482

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

The registered agent must sign accepting the designation.

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.

JEARLD H QUICK OPS

Letter Number: 720A00022447

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COVER LETTER

Division of Corporations							
SURIFCT:	HARWICK HOMES BUILDING GROUP, LLC						
(Name of Limite	(Name of Limited Liability Company)						
The enclosed member_resignation or dissociat							
Please return all correspondence concerning the	hand RA is matter to:						
CHRISTOPHER S KLEPKO							
(Contact Person)							
HARWICK HOMES BUILDING GROUP, LLC							
(Firm/Company)							
3368 WOODS EDGE CIRCLE #101							
(Address)							
BONITA SPRINGS, FL 34134							
(City/State and Zip Code)							
For further information concerning this matter.	please call:						
CHRISTOPHER S. KLEPKO	239 498-0801						
(Name of Contact Person)	(Area Code & Daytime Telephone Number)						
Enclosed please find a check made payable to t	he Florida Department of State for:						
☐ \$25 Filing Fee	\$55 Filing Fee & Certified Copy						
24 W							
Mailing Address: Registration Section	Street Address:						
Division of Corporations	Registration Section Division of Corporations						
P.O. Box 6327	The Centre of Tallahassee						
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810						
	Tallahassee, FL 32303						

TO: Registration Section

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.

L N	ame of the limited liability company: HARWICK HOM	ИES BL	JILO	DING GRO	OUP, LLC
2. (a)	3368 WOODS EDGE CIRCLE #101		(b)	3368 WC	OODS EDGE CIRCLE #101
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	BONITA SPRINGS, FL 34134	_		BONITA	SPRINGS, FL 34134
	08/20/2018		L	18000019	9482
3 5. (a)	Date of filing/registration in Florida MARK E. SMITH	4.	_		Document number
J. (4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat 3368 WOODS EDGE CIRCLE #101			– e:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-	
	BONITA SPRINGS	34134			
(b)	CHRISTOHER S. KLEPKO		F I VON DZB		
,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddr	ess:	San M
	NEW Registered Office Address:	·			
	3368 WOODS EDGE CIRCLE #101				L L 2
	BONITA SPRINGS FL	34134			
agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	register ability c of the lin limited	rea om mite liat	office and pany, it is ed liability pility com	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
Signa	ture of a member or authorized representative of a member				Printed or typed name of signee
I herei irovisi he obl o mere	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ly reflect a change in the registered office address. It is in writing of this change.	ee to ac perforn l for in tereby c	rt in iand Cha ionf	this capa ce of my a apter 605, firm that t	win I forestern assume a mount of the

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

signature of Registered Agent