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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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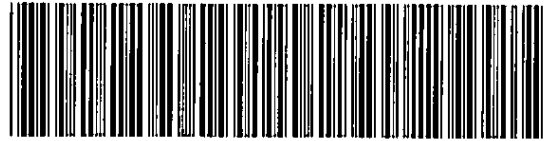
(Business Entity Name)

(Document Number)

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Y SULKER
AUG 19 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 9, 2019

ALOE & VERA LLC
1519 NOTTINGHAM DRIVE
NAPLES, FL 34109

SUBJECT: ALOE & VERA, LLC
Ref. Number: L18000237627

We have received your document for ALOE & VERA, 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):

You need to fill out the section b

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.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 219A00013823

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Aloe & Vera

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:

Candace R. Glover

Name of Person

Aloe & Vera

Firm/Company

1519 Nottingham Drive

Address

Naples, FL 34109

City/State and Zip Code

candacerglover@gmail.com

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

For further information concerning this matter, please call:

Candace Glover

Name of Person

239

431-1120

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

↑ Friendly note:
my document was
accidentally sent to
someone else. Thankfully
she forwarded mail!!
Thanks

**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: Aloe & Vera, LLC
2. (a) 844 Anchor Rode Drive, Naples, FL 34103 (b) 1519 Nottingham Dr., Naples 34109
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)
- 1485 Pine Ridge Rd, Ste 105 1519 Nottingham Drive
Naples, FL 34109 Naples, FL 34109

3. 10/08/2018 4. L18000237627
Date of filing/registration in Florida Document number

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1485 Pine Ridge Rd, Ste 105
Naples, FL 34109

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

NEW Registered Office Address:
1485 Pine Ridge Rd, Ste 105
Naples, FL 34109

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.

Candace R. Glover
Signature of a member or authorized representative of a member

Candace R. Glover
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.

Candace R. Glover
Signature of Registered Agent