

L19000000 1104

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

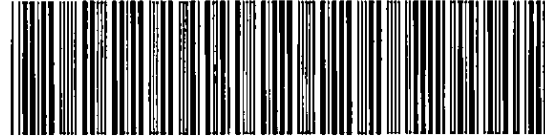
(Business Entity Name)

(Document Number)

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

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ALBRITTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Bronte's Boutique 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:

Bronte Marino

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

Bronte's Boutique

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

6415 95th Street East

\_\_\_\_\_  
Address

Bradenton, FL 34202

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

brontesboutique47@gmail.com

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

For further information concerning this matter, please call:

Bronte Marino

631

377-8525

\_\_\_\_\_  
at ( )

\_\_\_\_\_  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 4, 2019

BRONTE MARINO  
6415 95TH STREET EAST  
BRADENTON, FL 34202

SUBJECT: BRONTE'S BOUTIQUE LLC  
Ref. Number: L19000001104

We have received your document for BRONTE'S BOUTIQUE 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Irene Albritton  
Regulatory Specialist II

Letter Number: 819A00022706

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**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.*

**Bronte's Boutique LLC**

1. Name of the limited liability company: \_\_\_\_\_  
**6415 95th Street East** **6415 95th Street East**

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)  
**Bradenton, FL 34202** **Bradenton, FL 34202**


3. \_\_\_\_\_ 4. \_\_\_\_\_  
Date of filing/registration in Florida Document number  
**September, 26 2019** **L19000001104**

5. (a) \_\_\_\_\_  
United States Corporation Agents, Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
**13302 Winding Oak Court**

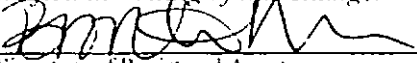
Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**  
**Suite A**  
**Tampa** **33612**  
\_\_\_\_\_, FL \_\_\_\_\_

(b) **Bronte Marino**  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address:**  
**6415 95th Street East**  
**NEW Registered Office Address:**  
**Bradenton** **34202**  
\_\_\_\_\_, FL \_\_\_\_\_

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.

 \_\_\_\_\_ **Bronte Marino**  
Signature of a member or authorized representative of a member 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.*

 \_\_\_\_\_  
Signature of Registered Agent