

L19000005995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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JUN 11 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 9, 2019

CARL LINDELL JR
4320 W KENNEDY BLVD
TAMPA, FL 33609

SUBJECT: LINDELL BAYFRONT ST. PETE LLC
Ref. Number: L19000005995

We have received your document for LINDELL BAYFRONT ST. PETE LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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) 245-6051.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 719A00009419

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: Lindell Bayfront St. Pete LLC

2. (a) 4320 W Kennedy Blvd Tampa, FL 33609 (b) 4320 W Kennedy Blvd Tampa, FL 33609

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3.	Date of filing/registration in Florida	4.	Document number
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5. (a) Carl Lindell Jr.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

4320 W Kennedy Blvd Ste 100 Tampa , FL 33609

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

FL

(b) Lindell Investments, Inc

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

4320 W Kennedy Blvd Ste 100 Tampa, FL 33609

NEW Registered Office Address:

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.

Signature of a member or authorized representative of a member

Carl Lindell Jr

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.

Signature of Registered Agent

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