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#### **COVER LETTER**

### TO: Registration Section Division of Corporations

# CRI Contracting LLC SUBJECT:

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:

**Robert Imig** 

Name of Person

CRI Contracting LLC

Firm/Company

19540 Bowring Park Rd #102

Address

Fort Myers, FL. 33967

City/State and Zip Code

bobimig1@gmail.com

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

For further information concerning this matter, please call:

**Robert Imig** 

239 \_\_\_\_\_

Name of Person

Area Code & Davtime Telephone Number

#### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Enclosed is a check for the following amount:

☑ \$25 Filing Fee

MAILING ADDRESS:

289-1652

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

□ \$55 Filing Fee & Certified Copy

#### STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH | LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability con submits the following statement in order to change its registered office or registered agent, or both, in the Stc Florida.

1. Na	me of the limited liability company:CRI Contract	ting LL	C				
2. (a)		(	b)				
2, (1)	Principal office address of limited liability company: ( <i>Note: MUST BE STREET ADDRESS</i> )		N	Aailing address of (Note: MAY E			
	8771 Estero Blvd #703		8771 Es	tero Blvd #7	703		
	Fort Myers Beach, FL. 33931		Fort Mye	ers Beach, I	FL. 3	3931	
	3-11-2019		L1900006	67771			
3.	Date of filing/registration in Florida	4.		Document nu	ımber		
5. (a)	Robert Imig						
5. (a)	Registered Agent and Registered Office shown on the records of	the Florie	la Dept. of State				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u></u>				
	8771 Estero Blvd #703						
	Fort Myers Beach	3393	1				
(b)							
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	ddress:	•		201	
	Robert Imig			_		2015 JUN 24	
	NEW Registered Office Address:					2L	1
	19540 Bowring Park Rd #102			_		PH	
	Fort Myers, FI	L_3396	7			1 2: v5	C
the cha agent v was/w the art	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members icles of organization of the operating agreement of the	of the reg iability of of the li c limited	istered office company, it is mited liability	e and the busi s hereby conf y company or npany.	ness of irmed t as othe	fice of hat the erwise	the registe change(s) provided i
1 hana	ture of a member or authorized representative of a member by accept the appointment as registered agent and ag	ree to a	ct in this can	Printed or type acity I furthe	er nare	e to co	mnly with
provis the ob- to mer notifie	ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide by reflex a change in the registered office address. I d in writing of this change.	e perfori ed for in hereby	nance of my Chapter 605 confirm that	duties, and I of the first of the limited lice of the lice	am fam this doc ability c	iliar w sumeni sompa	ith and act is being finy has been
Signatu	ire of Registered Agent						

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