

L19 000 117819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

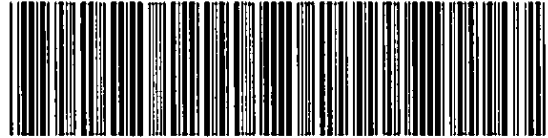
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800345573088

06/01/20--01005--022 **55.00

FILED

2020 SEP 14 PM 4:41

CLERK OF SUPERIOR COURT
MASSACHUSETTS

SEP 14 2020
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2020

NANCY IGLESIA
REW BUSINESS LLC
2704 REW CIRCLE
OCOEE, FL 34761

SUBJECT: REW BUSINESS, LLC
Ref. Number: L19000117819

We have received your document for REW BUSINESS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 920A00012038

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: REW BUSINESS 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:

NANCY J. IGLESIA
Name of Person

Firm/Company
2704 REW CIRCLE
Address

OCOE FL 34761
City/State and Zip Code

REWBUSINESS2019@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NANCY J. IGLESIA at 407, 318 0064
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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: REW BUSINESS LLC
2. (a) 2704 REW CIRCLE OCOEE FL 34761 (b) SAME
- Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 9.2.2020 Date of filing/registration in Florida 4. L19000117819 Document number

5. (a) LEGALCOPD SOLUTIONS LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
3440 W HOLLYWOOD BLVD SUITE 415
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

HOLLYWOOD, FL 30021

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

2704 REW CIRCLE
NEW Registered Office Address:

OCOEE, FL 34761

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]
Signature of a member or authorized representative of a member

NANCY J. IGLESIA
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]
Signature of Registered Agent

FILED
2020 SEP 14 PM 4:41
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
STATE OF FLORIDA