

L19000191710

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

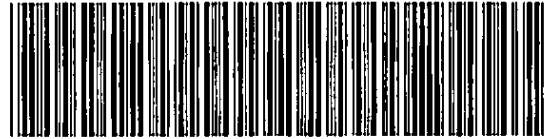
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2022 JUL -1 AM 9:10

SECRETARY OF STATE

Ra Change

JUL 13 2022

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Wilderness Group, 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:

Thomas McGovern
Name of Person

The Wilderness Group, LLC
Firm/Company

9978 Majorca Pl.
Address

Boca Raton, FL 33434
City/State and Zip Code

thomas@wildernessgroup.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas McGovern at (561) 445-1179
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

2022 JUL -1 AM 9:10
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL



RECEIVED

2022 JUL -1 AM 8:28

FLORIDA DEPARTMENT OF STATE
Division of Corporations

TELETYPE UNIT

June 9, 2022

THOMAS F MCGOVERN
THE WILDERNESS GROUP LLC
9978 MAJORCA PL
BOCA RATON, FL 33434

SUBJECT: THE WILDERNESS GROUP LLC
Ref. Number: L19000191710

We have received your document for THE WILDERNESS GROUP 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 Limited Liability Company. 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.

Diane Cushing
Senior Section Administrator

Letter Number: 722A00012885

**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: The Wilderness Group, LLC

2. (a) THE WILDERNESS GROUP, LLC

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

9978 MAJORCA PLACE

BOCA RATON, FL 33434

(b) THE WILDERNESS GROUP, LLC

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

9978 MAJORCA PLACE

BOCA RATON, FL 33434

8/8/2019

3. Date of filing/registration in Florida

L19000191710

4. Document number

5. (a) THE WILDERNESS GROUP, LLC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

UNITED STATES CORPORATION AGENTS, INC.

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

5575 S. SEMORAN BLVD. SUITE 36

ORLANDO, FL 32822

(b) THOMAS MCGOVERN

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

THE WILDERNESS GROUP, LLC

NEW Registered Office Address:

9978 MAJOCA PLACE

BOCA RATON, FL 33434

FILED
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TALLAHASSEE, FL
CLERK OF CIRCUIT COURT

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

Thomas McGovern

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