

L19000 196974

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

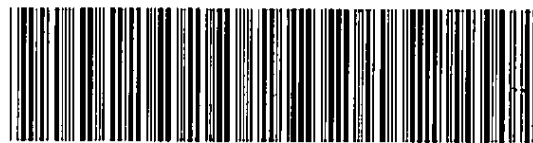
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500333377135

06/13/19--01004--030 1925.00

FILED
2019 AUG 19 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y. SULKER
AUG 26 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sapp Realty 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:

Patricia S. Sapp
Name of Person

Sapp Realty Group LLC
Firm/Company

2200 Kings Hwy 3L Ste. 99
Address

Port Charlotte, FL 33980
City/State and Zip Code

patty@sapp.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patricia S. Sapp at (941) 628-6347
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

**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: Sapp Realty Group LLC
2. (a) 2200 Kings Hwy 3L Ste 99 (b) 2200 Kings Hwy 3L Ste 99
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)
Pt. Charlotte FL 33980 Pt. Charlotte, FL 33980
3. Aug. 1 2019 4. L19000196974
Date of filing/registration in Florida Document number
5. (a) Patricia S. Sapp
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
2214 Yeoman Ct.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Punta Gorda
FL 33983
- (b) Patricia S. Sapp
Enter name of NEW Registered Agent and/or NEW Registered Office address:
2200 Kings Hwy 3L Ste 99
NEW Registered Office Address:
Port Charlotte FL 33980

FILED
2019 AUG 19 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

PSSapp
Signature of a member or authorized representative of a member

Patricia S. Sapp
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.

PSSapp
Signature of Registered Agent