

L190000 274 1209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

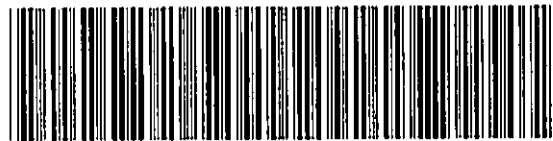
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400337297204

11/22/19--01017--011 **05.00

FILED
2019 NOV 22 PM 1:15
SECTION 1
TALLAHASSEE, FL 32309

Y SUKKE
DESIGN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JN BAGLIANI'S Italian Specialties 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 BAGLIANI
Name of Person

JN BAGLIANI'S Italian Specialties LLC
Firm/Company

5618 Cape Harbour Dr #201
Address

Cape Coral FL 33914
City/State and Zip Code

JNBAGS@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nancy BAGLIANI at (809) 839-1640
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: JN BAGLIANI'S Italian Specialties LLC

2. (a) 5618 Cape Harbor Dr
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

#201
Cape Coral FL 33914

(b) 5618 Cape Harbor Dr
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

#201
Cape Coral FL 33914

3. 11/4/2019
Date of filing/registration in Florida

4. L19000274129
Document number

5. (a) UNITED STATES CORPORATION AGENTS INC.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

5575 S. Semoran Blvd
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Orlando, FL 32822

(b) NANCY BAGLIANI
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

5618 Cape Harbor Dr
NEW Registered Office Address:

#201
Cape Coral, FL 33914

2019 NOV 22 PM 1:15
FILED
TALLAHASSEE, FL
SECRETARY OF STATE

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 BAGLIANI
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