

L19000299174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

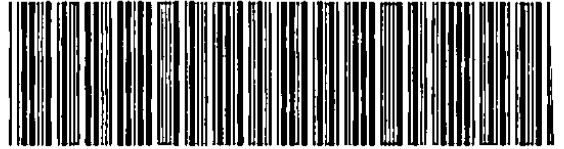
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J. HORNE

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SECRETARY OF STATE  
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WOODBINE PROJECT  
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:

TOM CHELEOTIS  
Name of Person

Carrollton School  
Firm/Company

3747 Main Hwy  
Address

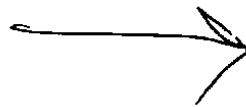
Miami FL 33133  
City/State and Zip Code

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

For further information concerning this matter, please call:

Tom at (305) 446-5673  
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

# 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: WOODBINE PROJECT LLC

2. (a) 3747 MAIN HWY (b) \_\_\_\_\_

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE)

MIAMI, FL 33133

L 19000299174

3. 12-13-2019 Date of filing/registration in Florida

4. L 19000299174 Document number

5. (a) GLEN KALKUS  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

3747 MAIN HWY  
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)

MIAMI, FL 33133

(b) PATRICK COLE  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

3747 MAIN HWY  
NEW Registered Office Address:

MIAMI, FL 33133

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that any 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 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.

Raphael B. Barton  
Signature of a member or authorized representative of a member

RAFAEL BARTON  
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 understand 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.

Patrick P. Cole  
Signature of Registered Agent

PATRICK

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

2022 NOV -8 PM 4:01  
SECRETARY OF STATE  
TALLAHASSEE, FL