K20000039367

(Re	questor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
	_	_		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Consider the second second second	500			
Special Instructions to Filing Officer:				
	<u>.</u>			

Office Use Only



100364905881

04/27/21--01007--023 **25.00

APR 2 6 2021

2021 APR 26 PN 1:45

N BRUCE

Loretta Mae Copper, PLLC 70 Emerald Woods Drive K 10 Naples, FL 34108

April 21, 2012

To the Division of Corporation:

Please note when you search by name to find LORETTA MAE COPPER PLLC it is shows as LORETTA MAE COOPER LLC.

Can this be changed to COPPER?

Thank you.

Loretta Copper

2021 APR 28 PM 1:49

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.

Мa	Loretta Mae Copp time of the limited liability company:		LC		
(a)	70 Emerald Woods Drive, K10				ald Woods Drive, K10
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Naples.			Naples,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Florida 34108		-	Florida 3	4108
	02/02/2020		L	20000039	9367
(a)	Date of filing/registration in Florida Copper, Loreita	4.			Document number
(a)	Registered Agent and Registered Office shown on the records of 50 Emerald Woods Drive,		rida D	ept. of Sta	ate:
	Registered Office Address (MUST BE FLORIDA STREET) C3	4DDR)	ESS)		_
	Naples, , FL	34103	3	· · · · · ·	
(b)					ZOZI APR TALLA:
	Enter name of NEW Registered Agent and/or NEW Registered	Office	addr	<u>eşs</u> :	APR 28 PM
	NEW Registered Office Address: 70 Emerald Woods Drive, K10				
	Naples, FL	34108	3		- . " • • • •
nge nt w /we artic	mited liability company is not organized under the law or changes are made, the Florida street address of the zill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of the organization of the operating agreement of the authorized by the authorized by the operating agreement of the authorized by the operating agreement of the authorized by t	regist bility f the	ered com limite d lial	office ar pany, it ed liabili pility cor	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
ereb visio obli iere	ure of a member of authorized representative of a member on accept the appointment as registered agent and agricus of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. I have a provided in the registered office address. I have a provided in the registered of the registered agent.	ee to c perfor I for it sereby	act in mane n Che conf	this cap ce of my apter 60. irm that	ranted or typed namy of signee pacity. I further agree to comply with the duties, and I am familiar with and acces, F.S. Or, if this document is being fill the limited liability company has been

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