

L21 0000 14121

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

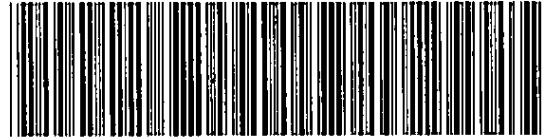
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900373162719

RECEIVED

JAN 10 2022

01/11/22--01012--018 \*\*25.00

FILED

2022 FEB 11 AM 11:59

SECRETARY OF STATE  
TALLAHASSEE, FL

O SIMMONS

FEB 22 2022



RECEIVED

2022 FEB 11 AM 8:21

FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE  
Division of Corporations TALLAHASSEE, FL

January 25, 2022

MARJORIE S DEL ROSARIO  
9222 CAMINO VILLA BLVD  
TAMPA, FL 33635

SUBJECT: MARJORIE S DEL ROSARIO LLC  
Ref. Number: L21000014121

We have received your document for MARJORIE S DEL ROSARIO LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Octavia L Simmons  
Regulatory Specialist II Supervisor

Letter Number: 422A00001906

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

Marjorie S Del Rosario LLC

**SUBJECT:** \_\_\_\_\_  
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:

Marjorie Del Rosario

\_\_\_\_\_  
Name of Person

Marjorie S Del Rosario LLC

\_\_\_\_\_  
Firm/Company

9222 Camino Villa Blvd

\_\_\_\_\_  
Address

Tampa, Florida 33635

\_\_\_\_\_  
City/State and Zip Code

realestatemarjorie@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marjorie DEL ROSARIO 813 705.4779

\_\_\_\_\_  
Name of Person at ( ) \_\_\_\_\_  
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

**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: Marjorie S Del Rosario LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

9222 Camino villa blvd  
Tampa, Florida 33635

3. \_\_\_\_\_ 4. \_\_\_\_\_  
Date of filing/registration in Florida Document number

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

Registered Agent INC  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
7901 4th Street North suite 300  
St. Petersburg, FL 33702

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

Marjorie S Del Rosario  
**NEW** Registered Office Address:  
9824 Lychee loop #204  
Riverview, FL 33569

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

Marjorie S Del Rosario  
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.

[Signature]  
Signature of Registered Agent

FILED  
2022 FEB 11 AM 11:59  
SECRETARY OF STATE  
TALLAHASSEE, FL