

L21000080977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

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2021 DEC 10 AM 7:19

SECRETARY OF STATE  
TALLAHASSEE, FL

O SIMMONS

JUL 08 2021



FLORIDA DEPARTMENT OF STATE 2021 DEC 10 AM 8:19  
Division of Corporations

November 8, 2021

KATHARINE POWELL  
3991 SE 77TH PL  
INGLIS, FL 34449

SUBJECT: CARTERS CURB APPEAL LLC  
Ref. Number: L21000080977

We have received your document for CARTERS CURB APPEAL LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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: 521A00027157

*please  
see  
attached*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 27, 2021

KATHARINE POWELL  
PO BOX 174  
INGLIS, FL 34449

SUBJECT: CARTERS CURB APPEAL LLC  
Ref. Number: L21000080977

2021 JUL -6 PM 1:16

RECEIVED

We have received your document for CARTERS CURB APPEAL LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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: 421A00011455

*Please  
see  
attached  
Have a blessed  
day! ☺*

COVER LETTER

TO: Registration Section  
Division of Corporations

2021 AUG 26 AM 10:54

SUBJECT: CARTERS CURB Appeal 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:

KATHARINE POWELL  
Name of Person

CARTER'S CURB APPEAL LLC  
Firm/Company

3991 SE 7TH PLACE  
Address

INGLIS, FL 34449  
City/State and Zip Code

Katie Seeba-81@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Katharine Powell at ( 916 ) 896-8184  
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

**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: Carter's CURB Appeal 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)

3991 se 77th PLACE  
INGLIS, FL 34449

P.O. Box 174  
INGLIS, FLA 34449

3. 02/10/2021 4. L21000080977  
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:

UNITED STATES CORP. AGENT  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
5574 S. SEMORAN BLVD #36  
ORLANDO, FL 32822

**FILED**  
2021 DEC 10 AM 7:19  
SECRETARY OF STATE  
TALLAHASSEE, FL

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

KATHARINE Powell  
NEW Registered Office Address:  
3991 se 77th PLACE  
INGLIS, FL 34449

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 of a member or authorized representative of a member  
KATHARINE Powell  
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 of Registered Agent