

L21000190766

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

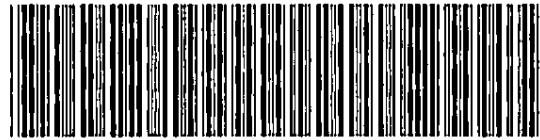
(Business Entity Name)

(Document Number)

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PORTLAND, OREGON

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Except as noted below, members of the Pennsylvania & New Jersey Bars

* Also member of Arizona, Minnesota, New York, Ohio, Texas, Virginia, Washington, Oregon, Oklahoma, Maryland & Utah Bars

Δ Member of Pennsylvania Bar, only

° Also member of New York & Massachusetts Bars

† Also member of District of Columbia Bar

° Member of Colorado, Connecticut, Florida, Massachusetts & North Carolina Bars, only

Sender's E-mail: April@RMontgomery-Law.com

June 28, 2021

Via FedEx

Registration Section

Division of Corporations

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

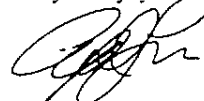
Re: Change of Registered Addresses

Dear Sir/Madam:

Please find enclosed for filing two (2) Change of Registered Address requests for "Arch 22 FLA, LLC" and "Appollonia FLA, LLC, as well as a check made payable to the "Florida Division of Corporations" in the amount of \$50.00, for the total filing fee for both requests.

Upon filing, please return file-stamped copies of the same to my attention in the self-addressed stamped envelope. Please feel free to reach out to me directly with any questions you might have.

Very truly yours,



April V. Francia

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: APPOLLONIA 22 FLA. 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:

APRIL FRANCIA, ESQ

Name of Person

ROBERT H MONTGOMERY III ESQ PC

Firm/Company

230 S BROAD ST STE 305

Address

PHILADELPHIA PA 19102

City/State and Zip Code

APRIL@RMONTGOMERY-LAW.COM

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

For further information concerning this matter, please call:

APRIL FRANCIA, ESQ.

215

731-1404 X. 6

at (_____) _____

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: APPOLLONIA 22 FLA, 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**)

6605 CASTLELAWN PLACE

6605 CASTLELAWN PLACE

NAPLES, FL 34113

NAPLES, FL 34113

APRIL 23, 2021

L21000190766

3. Date of filing/registration in Florida

4. Document number

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

JAMES DIMARINO

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

6605 CASTLELAWN PLACE

NAPLES, FL 34113

(b) Registered Agents Inc.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

7901 4th St N

NEW Registered Office Address:

STE 300

St. Petersburg, FL 33702

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.

James Dimarino

JAMES DIMARINO

Signature of a member or authorized representative of a member

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.

Bee Name
Signature of Registered Agent