

L21000418041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

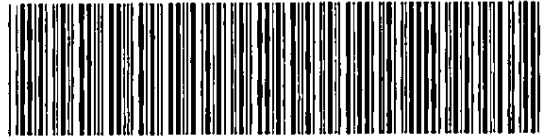
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100409105141

05/24/23--01006--020 **25.00

FILED
2023 MAY 24 PM 1:46
CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Zoey Gutierrez-Nickel Orthodontics, 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:

Stephanie M. LeBlanc, Esq

Name of Person

Lawn & LeBanc PLLC

Firm/Company

5070 Highway A1A, Suite 221

Address

Vero Beach, FL, 32963

City/State and Zip Code

Stephanie@verobeachlawgroup.com

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

For further information concerning this matter, please call:

Stephanie M. LeBlanc, Esq 772 231-1212

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

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.

2. (a) 373 Sebastian Blvd, Suite #B, Sebastian, FL 32958
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

(b) 925 TURTLE COVE LN VERO BEACH, FL 32963
-Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

5. (a) GUTIERREZ-NICKEL, ZOEY, DR.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
925 TURTLE COVE LN VERO BEACH, FL 32963

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

_____, Fl. _____

(b) Stephanie M. LeBlanc, Esq.

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

5070 Highway A1A, Suite 221 Vero Beach, FL 32963

NEW Registered Office Address:

_____, FL

FILED
2023 MAY 24 PM 1:46
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

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.

Zeigler
Signature of a member or authorized representative of a member

Zoey Gutierrez-Nickel

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.

Stephanie LeBlanc
Signature of Registered Agent

INHS18 (2/14)