

K21000483052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

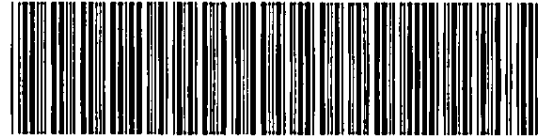
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2022 AUG 15 PM 4:23
TALLAHASSEE, FLORIDA
S. PRATHER

AUG 23 2022

S. PRATHER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 22, 2022

CENTRO CANTINA HOLDINGS, LLC
1607 W. CLEVELAND ST., SUITE 100
TAMPA, FL 33606

SUBJECT: CENTRO CANTINA HOLDINGS, LLC
Ref. Number: L21000483082

We have received your document for CENTRO CANTINA HOLDINGS, 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):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

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) 245-6939.

Stacy Prather
Regulatory Specialist III

Letter Number: 022A00014100

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CENTRO CANTINA HOLDINGS, 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:

ROBERT MICHAEL FAUSETTE

Name of Person

Firm/Company

1607 W CLEVELAND ST #100

Address

TAMPA FL 33606

City/State and Zip Code

ROBERT@REVIVALHOMEBUYER.COM

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

For further information concerning this matter, please call:

ROBERT FAUSETTE

813

451-4452

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

this fee has already been paid and cashed on your end

INHS18 (2/14)

RECEIVED

AUG 15 2022

**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: CENTRO CANTINA HOLDINGS, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

1600 EAST 8TH AVENUE, SUITE D204 TAMPA, FL 33605

1607 W. CLEVELAND ST., SUITE 100 TAMPA, FL 33606

11/12/2021

L21000483082

3. Date of filing/registration in Florida

4. Document number

5. (a) HUNTER BUSINESS LAW

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

HUNTER BUSINESS LAW

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

119 S. DAKOTA AVENUE

TAMPA, FL 33606

(b) ROBERT MICHAEL FAUSETTE

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

ROBERT MICHAEL FAUSETTE

NEW Registered Office Address:

1607 W. CLEVELAND ST., SUITE 100

TAMPA, FL 33606

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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.

RS

Signature of a member or authorized representative of a member

ROBERT MICHAEL FAUSETTE

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.

RS

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00