

2/14/23, 8:50 AM

Division of Corporations

L2200009244

Florida Department of State
Division of Corporations
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To:

Division of Corporations
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Second Submission - Please honor
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From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608)827-5300
Fax Number : (608)827-5501

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: fmoha63198@comcast.net

**LLC REGISTERED AGENT CHANGE
1874 CAPESIDE CIR LLC**

Certificate of Status	0
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Corporate Filing Menu

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T. LEMIEUX

MAY 04 2023

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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: 1874 CAPELIDE CIR LLC

2. (a) 6077 NW 71 Terrace (b) 6077 NW 71 Terrace
 Principal office address of limited liability company. Mailing address of limited liability company
 (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
Parkland, Florida 33067 Parkland, Florida 33067

3. 1/3/2022 4. L22000009244
 Date of filing/registration in Florida Document number

5. (a) Business Filings Incorporated
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1200 South Pine Island Road

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Plantation, FL 33324

(b) Fazeed Mohammed
 Enter name of NEW Registered Agent and/or NEW Registered Office address

6077 NW 71 Terrace

NEW Registered Office Address:

Parkland, FL 33067

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.

Fazeed Mohammed
 Signature of a member or authorized representative of a member

Fazeed Mohammed, Member

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.

Fazeed Mohammed
 Signature of Registered Agent Fazeed Mohammed, Registered Agent

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

FILING FEE: \$25.00

2023 MAY -3 PM 4:49