

L22 000 368 326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

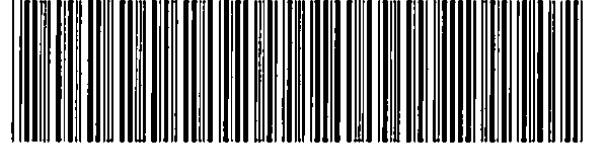
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400409387694

05/26/23--01010--011 **25.00

FILED
MAY 26 AM 11:33
2023
VUP

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PHILIDA REALTY, 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:

Kristina J. Wenberg, Esquire

Name of Person

Law Offices of Robert J. Perry, Jr., PLLC

Firm/Company

12627 San Jose Boulevard, Suite 103

Address

Jacksonville, Florida 32223

City/State and Zip Code

Jennifer@RobertPerryLawFirm.com

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

For further information concerning this matter, please call:

Kristina J. Wenberg, Esquire

Name of Person

at (904) 240-4815

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

STATE OF FLORIDA
STATE DEPARTMENT OF REVENUE
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 this 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: PHILIDA REALTY, LLC

2. (a) PHILIDA REALTY, LLC (b) PHILIDA REALTY, LLC

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

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

6001 Argyle Forest Boulevard, Suite 21

6001 Argyle Forest Boulevard, Suite 21, Box 105

Jacksonville, Florida 32244

Jacksonville, Florida 32244

3. August 22, 2022 4. L22000368326

Date of filing/registration in Florida Document number

5. (a) Preddy Law Firm, P.A.

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

Preddy Law Firm, P.A.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

12627 San Jose Boulevard, Suite 102

Jacksonville, FL 32223

(b) Kristina J. Wenberg, Esquire, Law Offices of Robert J. Perry, Jr., PLLC

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

Kristina J. Wenberg, Esquire, Law Offices of Robert J. Perry, Jr., PLLC

NEW Registered Office Address:

12627 San Jose Boulevard, Suite 103

Jacksonville, FL 32223

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.

Runettia U. Guess
Signature of a member or authorized representative of a member

Runettia U. Guess
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.

Kristina J. Wenberg
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00