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S. PRATHE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRITICAL MASS APOPKA REAL ESTATE, 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:

EDGAR A. BENES, ESQ.

Name of Person

EDGAR A. BENES, P.A.

Firm/Company

2300 NW CORPORATE BLVD., SUITE 222

Address

BOCA RATON, FLORIDA 33431

City/State and Zip Code

EBENES@BENESLAW.COM

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

For further information concerning this matter, please call:

EDGAR A. BENES, ESQ. 561 999-1993

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) 3740 NW 126TH AVE, CORAL SPRINGS, FL 33065
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

(b) 3740 NW 126TH AVE, CORAL SPRINGS, FL 33065
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

5. (a) ELVIRA HENGSTLER
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
3740 NW 126TH AVENUE, CORAL SPRINGS, FLORIDA 33065

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

_____, FL _____

3740 NW 126TH AVENUE, CORAL SPRINGS, FL 33065

NEW Registered Office Address:

_____, FL

Signature of a member or authorized representative of a member _____
Printed or typed name of signer _____

Signature of Registered Agent

INHS18 (2/14)