

L23 0000 22 368

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

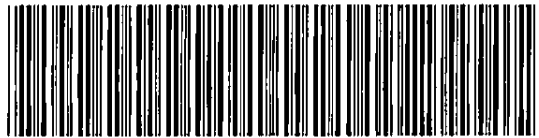
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

942 9th Ave S LLC

SUBJECT: _____
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:

Caroline Z. Worley

Name of Person

942 9th Ave S LLC

Firm/Company

PO BOX 2757

Address

Westerville, OH 43086

City/State and Zip Code

carolineworley@thechampioncompanies.com

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

For further information concerning this matter, please call:

Caroline Z. Worley	614	895-6811
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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

**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.

942 9th Ave S LLC	
1. Name of the limited liability company: _____	
942 9th Ave South	
2. (a) _____	(b) P.O. Box 2757
Principal office address of limited liability company:	Mailing address of limited liability company:
(Note: <u>MUST BE STREET ADDRESS</u>)	(Note: <u>MAY BE POST OFFICE BOX</u>)
Attn: 942 9th Ave S LLC	Attn: 942 9th Ave S LLC
_____	_____
Naples, FL 34102	Westerville, OH 43086
_____	_____
01/10/2023	L23000022368
3. _____	4. _____
Date of filing/registration in Florida	Document number
Brian Yeager	
5. (a) _____	
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	

Registered Office Address <u>(MUST BE FLORIDA STREET ADDRESS)</u>	
1551 Gulf Shore Blvd South	
_____	_____
Naples	34102
_____ FL _____	
Gregory L. Urbancic	
(b) _____	
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :	
4001 Tamiami Trail North	


<u>NEW Registered Office Address</u> :	
Suite 300	

Naples	34103
_____ FL _____	

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.

 _____ Signature of a member or authorized representative of a member	Brian H. Yeager, Manager _____ Printed or typed name of signee
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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.



Signature of Registered Agent