

LZ30000S133Z

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

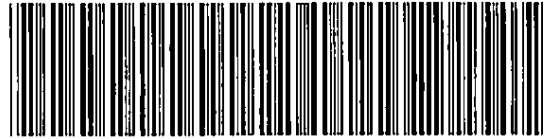
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2023 MAY 31 AM 11:46
SECRETARY OF STATE
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tree Trimming and Removal Pros LLC
Address change
Name of Limited Liability Company

Dear Sir or Madam: Sergio and Danielle
m. muro marie Caskinette
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sergio m. muro
Name of Person

Tree Trimming and Removal Pros LLC
Firm/Company

27901 Gunn Street
Address

Bonita Springs Florida 34135
City/State and Zip Code

Dmuro1121@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danielle marie Caskinette at (239) 896-6563
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.

1. Name of the limited liability company: Tree Trimming and Removal pros LLC

2. (a) 2701 Quinn Street (b) 2701 Quinn Street

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Bonita Springs Florida
34135

Bonita Springs FL
34135

3. 01/27/2023
Date of filing/registration in Florida

4. L23000051332
Document number

5. (a) Sergio M. Muro
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2701 Quinn Street

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Bonita Springs

FL 34135

(b) 27901 Quinn Street
Enter name of NEW Registered Agent and/or NEW Registered Office address:

27901 Quinn Street

NEW Registered Office Address:

Bonita Springs

FL 34135

2023 MAY 31 PM 11:46
TALLAHASSEE
STATE OF FLORIDA
SECRETARY OF STATE

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]

Signature of a member or authorized representative of a member

Danielle Marie Caskinette

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.

SM

Signature of Registered Agent