L23000139725

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sasiness Ellity Harrey
(Document Number)
(Document Number)
0.00.10.1
Certified Copies Certificates of Status
Special Instructions to Filing Officer: 09105/23
0 11 5/83
_
1.00.00
wrong torn
Office Use Only ()



100412251771

07/17/23--01013--008 **35.00

S. CHATHAM

OCT - 3 2023



·									
	٠ .	% * •		ĆOV	ER LETTER	•••	2		,
то:		on Section of Corporations						·	
SUBJE	ECT:	6572	Kevit	+ Blyne of Limi	rd, LL(ted Liability C				_
Dear S	ir or Madai	m:							
The en	closed Reg	istered Agent/R	egistered Off	ice Chang	e and fec(s) are	submitted	for filing	3 .	
Please	return all c	огтеspondence о	oncerning th	is matter t	o the following	; :			
	Daw	n John	1 50/ 1 Person						
_6	,57a	Kevi-	+ Blv	d, L	LC				
	943	Maravi Addres		ve.					
Fr	ort 1	Tyers, City/State an	FL 3	339c				•	-
<u>E</u>	Kimu mail addr	nal Co a C	ol. Con	nual report	notification)			SEP 0 5 21	023

For further information concerning this matter, please call:

Kim Thomas at (239) 334-2039

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:

INHS18 (2/14) \$ \$35 check previously Sent & Cleared, 7/19/23

CK*1001 (Sent using incorrect-form in error)

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. Na	me of the limited liability company: <u>le572 KeviH Bl</u>	vd, LLC
2. (a)	1943 Maravilla Ave (b)	- J
()		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Fort Myers FL 33901	(NUR: MAT BE FOST OFFICE BOA)
	151011WEKS, 1C 00101	
		· · · · · · · · · · · · · · · · · · ·
	3 27 2023 La	3000139725
3.	Date of filing/registration in Florida 4.	Document number
5. (a)	Holmes, David A, Esq.	
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	- (n)
		$\mathcal{L}_{\mathcal{G}}^{\mathcal{G}}$
	Punta Gorda , FL 33950	
	7 11 23 100	8
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	· ~ ~
	tenter name of NEW Registered Agent and/or NEW Registered Office address.	
	1943 Maravilla Ave	-
	NEW Registered Office Address:	
		-
	FORTS FL 33901	
If this 1	imited liability company is not organized under the laws of the State of Flo	- aride it is berahy confirmed that after the
change	or changes are made, the Florida street address of the registered office and	the business office of the registered
was/we	will be identical. Or, in the case of a Florida limited liability company, it is ere authorized by an affirmative vote of the members of the limited liability also of companies in a state of the limited liability and the companies of the limited liability and the liability and liability and the liability and liability	y company or as otherwise provided in
I Kas	cles of organization or the operating agreement of the limited liability com	· · · ·
Signa	ture of a member or authorized representative of a member	L. Johnson, MGR Printed or typed name of signee
l herei provisi	by accept the appointment as registered agent and agree to act in this cape ons of all statutes relative to the proper and complete performance of my c	icity. I further agree to comply with the luties, and I am familiar with and accept
to mere notified	ons of all statutes relative to the proper and complete performance of my eigations of my position as registered agent as provided for in Chapter 605 elv reflect a chappe in the registered office address, I hereby confirm that it is writing of this chappe.	he limited liability company has been
<u> </u>	My XONNONI	
Signatu	re of Registered Agent	



August 18, 2023

DAWN JOHNSON 1943 MARAVILLA AVE FORT MYERS, FL 33901 US

SUBJECT: 6572 KEVITT BLVD, LLC Ref. Number: L23000139725

We have received your document for and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham Regulatory Specialist III Director's Office

Letter Number: 823A00019155

2/31/23 Please see attached Resubmission. Hank you, Dawn Johnson