

L24000078011

Florida Department of State
Division of Corporations
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orig. Submission 3/21

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : PATRICK H NEALE PLLC DBA PATRICK NEALE & ASSOCIATES
Account Number : I20240000032
Phone : (239)642-1485
Fax Number : (239)642-1487

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE HOWELL PLUMBING ENTERPRISE, LLC

Certificate of Status	0
Certified Copy	01
Page Count	01
Estimated Charge	\$43.75

M. SOLOMON

APR 17 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Howell Plumbing Enterprise, 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:

Patrick H. Neale

Name of Person

Patrick Neale & Associates

Firm/Company

5470 Bryson Court, Suite 103

Address

Naples, FL 34109

City/State and Zip Code

office@patrickneale.com

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

For further information concerning this matter, please call:

Patrick H. Neale

at (239)

642-1485

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

INHS18 (2/14)

2024 MAR 21 4:19:30

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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: Howell Plumbing Enterprise LLC
2. (a) Howell Plumbing Enterprise LLC
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
554 Julia Street
New Smyrna Beach FL 32168
- (b) Howell Plumbing Enterprise LLC
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
707 Belleair Road
Clearwater FL 33756
3. 2/13/2024
Date of filing/registration in Florida
4. 4000078011
Document number
5. (a) Northwest Registered Agent LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
7901 4th Street N, Suite 300
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
St. Petersburg, FL 33702
- (b) Patrick H. Neale
Enter name of NEW Registered Agent and/or NEW Registered Office address:
Patrick Neale & Associates
NEW Registered Office Address:
5470 Bryson Court, Suite 103
Naples, FL 34109

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.

Dan Smith Daniel Smith
Signature of a member or authorized representative of a member 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.

Dan Smith
Signature of Registered Agent

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

2024 MAR 21 AM 9:30

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