

L24 000 116 832

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

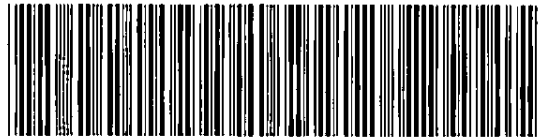
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300428167743

04/22/24--01028--006 **25.00

2024 APR 22 PM 4:54
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RESTORE 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:

MARIE-MICHELLE DUCLAS

Name of Person

RESTORE REAL ESTATE LLC

Firm/Company

16351 SW 23RD STREET

Address

MIRAMAR, FL 33027

City/State and Zip Code

melducas@gmail.com

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

For further information concerning this matter, please call:

MARIE-MICHELLE DUCLAS

954 243-6455
at ()

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

2024 APR 22 PM 4:54
SECRET
TALLAHASSEE, FL

**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: RESTORE REAL ESTATE, LLC
2. (a) 16351 SW 23RD STREET, MIRAMAR, FL 33027
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
- (b) 16351 SW 23RD STREET, MIRAMAR, FL 33027
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
3. MARCH 7, 2024 Date of filing/registration in Florida
4. L24000116832 Document number
5. (a) MELISSA DUCLAS
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
16351 SW 23RD STREET
Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**
MIRAMAR, FL 33027
- (b) MARIE-MICHELLE DUCLAS
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
16351 SW 23RD STREET
NEW Registered Office Address:
MIRAMAR, FL 33027

2024 APR 22 PM 4:54
SECRET
TALLAHASSEE, 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.

Michelle Duclas
Signature of a member or authorized representative of a member

MARIE-MICHELLE DUCLAS
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.

Michelle Duclas
Signature of Registered Agent