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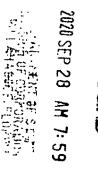
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SEP 2 9 2020 S. YOUNG





Aloia, Roland, Lubell & Morgan, PLLC 2222 Second Street Fort Myers, FL 33901 Phone: (239) 791-7950 Facsimile: (239) 791-7951

September 22, 2020

## VIA REGULAR U.S. MAIL

Florida Division of Corporations ATTN: Shelia S. Young Registration Section The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Re: Scanlon Family, LLC

Dear Shelia.

Please find enclosed the following requested documents for the resubmission of filing with the Florida Division of Corporations:

- 1) The Application by Foreign Limited Liability Company to file Amendment for Certificate of Authority for Scanlon Family, LLC, a Foreign Limited Liability Company, requesting the current Registered Agent on file be Amended to a Mr. Frank J. Aloia, Jr.:
- 2) A copy of the previous application submitted by Scanlon Family, LLC, a Foreign Limited Liability Company for Articles of Amendment to Articles of Organization, that was submitted on July 13, 2020 and rejected on September 8, 2020, for reference;
- 3) A copy of Letter # 120A00017084.

The \$25 filing fee is still being held by your department and our records indicate the check has been cashed, despite the rejection. As this matter is extremely time sensitive, please provide me a confirmation of filing Scanlon Family, LLC, a Foreign Limited Liability Company at your earliest convenience.

Thank you in advance for your assistance.

Sincerely,

Paralegal to

Frank J. Aloia, Jr., Esq.

FJA/DMS/acm Enclosure as stated

## **COVER LETTER**

Division of Corporations
SUBJECT: Scanion family, LLC.  Name of Foreign Limited Liability Company
Dear Sir or Madam:
The enclosed application, certificate and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
FRANK J. Aloja JR Name of Person
Aldia Roland Lubell & Morgan PLLC
2222 School Struct
FORT MYERS, FL 33901 City/State and Zip Code
Faldia Dlaw defined. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
FRANK J. FNOIA JR at (239) 791.7950  Name of Person Area Code & Daytime Telephone Number
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, F1, 323142415 N. Monroe Street, Suite 810Tallahassee, F1, 32303
Enclosed is a check for the following amount:  EllS25 Fifing Fee
CR2E055 (9/15)

## . APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of	
State: Scanion family uc	_
linter new principal office address, if applicable:	. :=
(Principal office address  MUST BE A STREET ADDRESS)	-
Einter new mailing address, if applicable:  (Mailing address  MAY BE A POST OFFICE BOX)	) )
2. The Florida document number of this limited liability company is: M 1100000 17 62	<u>-</u>
3. Jurisdiction of its organization: DE	-
4. Date authorized to do business in Florida: 04 07 2011	•
SECTION II (5-9 complete only the applicable changes)	
5. New name of the limited liability company:	·)
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach copy of the written consent of the managers or managing members adopting the alternate name. The alternate name contain "Limited Liability Company," "L.L.C." or "LLC.")	a iame
6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:	
Name of New Registered Agent: FRANK J. AIDIA JR	≣1
New Registered Office Address: 2222 SCCONG STRECT  Enter Florida Street Address	
FORT MYCRS Florida 3390   Zip Code	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar wand 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 limitability company has been notified in writing of this change.	uth ued
If Changing Registered A legistered Age legistered Age	<u>nt</u>

itle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
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aforementioned an	ficate, if required: no more than 9 nendment(s), duly authenticated b the law of which this entity is org	by the official having custody of records in	□Remo

Filing Fee: \$25.00