

M1500000 7176

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TO: Registration Section
Division of Corporations

SUBJECT: Super Casis 603, 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:

Julia Basora

Name of Person

Basora Investment Group, LLC

Firm/Company

2400 First Street Suite 305

Address

Fort Myers FL 33901

City/State and Zip Code

vanessa@southtrade.com.gu

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

For further information concerning this matter, please call:

Julia Basora

Name of Person

at (239) 245 9255

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 21, 2019

JULIA BASORA
2400 FIRST ST STE 305
FORT MYERS, FL 33901

SUBJECT: SUPER OASIS 603, LLC
Ref. Number: M15000007176

We have received your document for SUPER OASIS 603, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Part B must be completed with the new registered agent's information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist III

Letter Number: 519A00012565

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2019 JUL 24 PM 12:24
JUL 24

**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: Super Oasis 603, LLC

2. (a) 3000 Oasis Grand Blvd (b) _____

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Suite 603

FORT MYERS FL 33916

4/30/2014

M15000007176

3. Date of filing/registration in Florida

4. Document number

5. (a) Jan Marie Dougherty CPA
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

3000 N Atlantic Ave #208

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Cocoa Beach

FL 32931

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

clb Basora Investment Group LLC

NEW Registered Office Address:

2400 First Street Suite 305

Fort Myers

FL 33901

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 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.

Jan Marie Dougherty CPA
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00