

MAIL 300005224

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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R. WHITE

DEC 11 2019

2019 DEC 10 AM 9:39



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 4, 2019

ROSE DALESSANDRO  
3803 TAMiami TRl E  
NAPLES, FL 34112

SUBJECT: LAKEVIEW CASH LLC  
Ref. Number: M16000005224

We have received your document for LAKEVIEW CASH LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please fill out section 5(b) 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 II Supervisor

Letter Number: 019A00022701

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Lakeview Cash 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:

Rose Dalessandro

\_\_\_\_\_  
Name of Person

Lakeview Cash LLC

\_\_\_\_\_  
Firm/Company

3803 Tamiami Trl E

\_\_\_\_\_  
Address

Naples, Florida 34112

\_\_\_\_\_  
City/State and Zip Code

cashnow3803@yahoo.com

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

For further information concerning this matter, please call:

Rose Dalessandro

973

3428278

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
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

**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: Lakeview Cash LLC

2. (a) 3803 Tamiami Trl E (b) 3803 Tamiami Trl E

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Naples, Florida 34112

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

Naples, Florida 34112

10/10/2019

M16000005224

3. Date of filing/registration in Florida

4. Document number

5. (a) Thomas Wilson

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3803 Tamiami Trl E

Naples, FL 34112

(b) Rose Dalessandro

Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

3803 Tamiami Trl E

Naples, FL 34112

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]  
Signature of a member or authorized representative of a member

THOMAS WILSON

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.*

Rose Dalessandro  
Signature of Registered Agent

2019 DEC 10 AM 9:39  
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DEC 09 2019