## N 03228

(R	Requestor's Name)	
(A	address)	
(A	ddress)	
(C	City/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	Business Entity Nan	ne)
(D	Occument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	 o Filing Officer:	
Q. S	DILMC	
<u> Συν</u> 1	* *	

Office Use Only



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2022 APR -4 PM 2: 09 SEGRETARY OF STATE



RECEIVED

FLORIDA DEPARTMENT OF STATE

Division of C Division of Corporations

SECRETANTILL TATE TALLAHASSEE, FL

March 14, 2022

KRISSY HURD 16520 BURNT STORE RD #C101 PUNTA GORDA, FL 33955

SUBJECT: BURNT STORE VILLAGE PROPERTY OWNER'S ASSOCIATION.

INC.

1.

Ref. Number: N03228

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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.

Letter Number: 022A00006040

Querida R Silas Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

Registration Section

TO:

Division of Corporations
SUBJECT: Burnt Store village Property Owner's Ass
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:
Lissy Hurd Name of Person
Burnt Stre Village property Awres & Association, INC
16520 Burnt Store Rd C101 Address
Punta Gorda FZ 33953 City State and Zip Code
Burnt Store Village of fie annual report notification)  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Coissy Hurd at 941, 505 4229 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, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

2 \$55 Filing Fee & Certified Copy 2 ready Sent

Enclosed is a check for the following amount:

🖒 \$25 Filing Fee

INHS18 (2:14)

## 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.

SH	ymu	s the johowing statement in the second second				
1.	Na	ame of the limited liability company: Burnt Sture	Village Prope	sty Ol	wher	2
_		16520 Bornt Store Rd. 175500	16520 BOCK	enetro. +	RO	)
2.	(a)	Principal office address of limited liability company:	Mailing address of	minico nacinty	Comman	y:
		(Note: MUST BE STREET ADDRESS)	(Note: MAYBE	<u>POST OFFIC</u>	<u>L BOX</u> )	
		#C101	#.C101	<del></del>		
		Dunta Gorda FL 33955	Purta Gorda	FL:	3375	5_
		- Turta Collabo Lo Collabo	1			
		<122184	NO322	8		
3.		Date of filing/registration in Florida 4.	Document num	ber		
_		PIF Doo storal Agent	- LLC			
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida	Dept. of State:			
		1832 Hendry Street				
		Registered Office Address MUSI BE FLORIDA STREET ADDRESS	7			
		Fort Myers FL 3390		S	2	
				TA!	022 /	_
		, FL	<del> ==</del> -	L K K K K K K K K K K K K K K K K K K K	APR	
	4.5	ERWEST W STLEGES, JR ESQ.		AR AR	<u></u>	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office ad-	dress:	SSX 10 /	P	
				777	.; ₹	
		TO I JC CENTER COURT			<b>2</b> 0 :	
		NEW Registered Office Address:			~	
		SUITE 3				
		•				
		PORT CHARLOTE ,FL 339	54			
Ιť	the	limited liability company is not organized under the laws of the	State of Florida, it is hereb	y confirmed	that aft	er the
ch	ang	e or changes are made, the Florida street address of the registere	many it is hereby confirm	ned that the	change	s)
	1	ere authorized by an affirmative vote of the members of the firm	intelline assuments			
th	e ari	icles of organization or the operating agreement of the influed i	lability company.	" (P.		. )
2	Fign	ature of a member grouthorized representative of a member	Printed or typed r	name of Signee	11517.27	-/
			in this capacity. I further	agree to con familiar wi	nply with	h the
p) th	rovis ie ob	eby accept the appointment as registered agent and agree to act tions of all statutes relative to the proper and complete performed digations of my position as registered agent as provided for in C rely reflect a change in the registered office address, I hereby con-	Chapter 605, F.S. Or, if this safery that the limited light	s document	is being v has be	filed en
to	mei otifie	rely reflect a change in the registered office address, I hereby co ed in writing of this change.	ngi m mai me monea moi	and an about	, =	
	عر	18 10/				
S	ignot	ufe of Registeren Apent				