

P18000090863

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

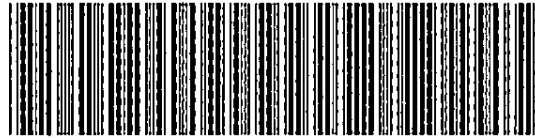
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

12/7/20

Office Use Only



300352877773

10/05/20--01014--007 \*\*55.00

FILED

2020 DEC -7 PM 5:12

SECRETARY OF STATE  
TALLAHASSEE, FL

12/9/20

On



2020 11 17 12:30

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 17, 2020

ROBERT W LAFFERTY SR  
955 S FEDERAL HIGHWAY  
FT LAUDERDALE, FL 33316

SUBJECT: THE WESLEY COMPANIES, INC.  
Ref. Number: P18000090863

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

The form you submitted is for a LIMITED LIABILITY COMPANY, but your entity is a PROFIT CORPORATION. Please complete and return the enclosed blank form(s). All pages must be returned in order to file 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.

Querida R Moore  
Regulatory Specialist II

Letter Number: 120A00023080

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: THE WESLEY COMPANIES INC  
Name of Corporation

DOCUMENT NUMBER: P18 00 0090863

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT W LAFFERTY

Name of Contact Person

THE WESLEY COMPANIES INC  
Firm/Company

955 S. FEDERAL HIGHWAY SUITE 457  
Address

FT LAUDERDALE FL 33316  
City/State and Zip Code

CHPLAFFERTY@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT W LAFFERTY at (954) 732 6039  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: THE WESLEY COMPANIES INC  
2. The principal office address: 955 S. FEDERAL HIGHWAY, SUITE 457  
FT LAUDERDALE FL 33316

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 11/02/2018 Document number: P18000090863

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

ROBERT W LAFFERTY SR  
2125 S. ANDREWS AVE  
FT LAUDERDALE FL 33316

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ROBERT W LAFFERTY SR  
955 S. FEDERAL HIGHWAY SUITE 457  
FT LAUDERDALE FL 33316

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature] GEO MGR  
Signature of an officer or director

ROBERT W LAFFERTY SR  
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]  
Signature of Registered Agent

DEC 1 2020  
Date

If signing on behalf of an entity:

ROBERT W LAFFERTY SR  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

(ON FILE)