

P93000025141

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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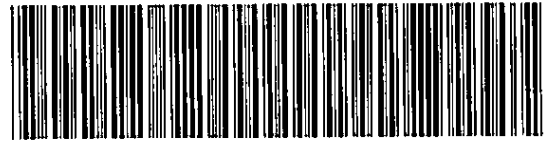
(Business Entity Name)

(Document Number)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Crews Sanitation, Inc.

\_\_\_\_\_  
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:

Michael A. Scott

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

The Dorcey Law Firm, PLC

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

10181 Six Mile Cypress Parkway, Suite C

\_\_\_\_\_  
Address

Fort Myers, FL 33966

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

mike@dorceylaw.com

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

For further information concerning this matter, please call:

Michael A. Scott

239 418-0169  
at ( )

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

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

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

**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: Crews Sanitation, Inc.

2. (a) 2700 ROCKFILL RD (b) P.O. BOX 27

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

FT. MYERS, FL 33916

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

FT. MYERS, FL 33902-0027

04/06/1993

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3. Date of filing/registration in Florida

4. Document number

5. (a) DLF Registered Agent Service, LLC

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

2700 ROCKFILL RD.

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

FT MYERS, FL 33916

(b)

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

10181 Six Mile Cypress Parkway, Suite C

**NEW Registered Office Address:**

Fort Myers, FL 33966

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.

Robert Himschoot

Printed or typed name of signee

Signature of a member or authorized representative of a member

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.

Michael A. Scott

Signature of Registered Agent

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

FILING FEE: \$25.00

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