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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

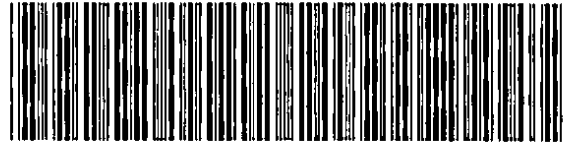
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

Alien Bus.
Organ.

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DC

COVER LETTER

TO: Registration Section
Division of Corporations

Angouleme Holdings II Limited Land Trust

SUBJECT: _____
(Name of Alien Business Organization or Financial Institution)

Dear Sir or Madam:

The enclosed Designation of Registered Agent and Registered Office for Alien Business Organization or Financial Institution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark Warda

(Name of Person)

Land Trust Service Corporation

(Firm/Company)

PO Box 186

(Address)

Lake Wales, FL 33859

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Warda

863

678-0011

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:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certified Copy

DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION OR FINANCIAL INSTITUTION

PURSUANT TO SECTION 607.0505 OR 655.0201, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION OR FINANCIAL INSTITUTION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA:

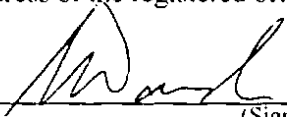
1. Angouleme Holdings II Limited Land Trust
(Name of alien business organization or financial institution)

2. Florida 3. N/A
(State or country under which entity is organized) (FEI Number, if applicable)

4. 28 West Park Avenue, Lake Wales, FL 33853
(Principal office address)

5. Name and Florida Street address of registered agent.
L.T.S.C., LLC
28 W PARK AVENUE
LAKE WALES, FL 33853

6. The street address of the registered office and the street address of the business office of the registered agent are identical.

7. 
(Signature of chairman, vice chairman, or officer)

8. Mark Warda, President of the Manager of the Trustee of the Trust
(Name and capacity of person signing in number 7 above)

9. Signature of registered agent:  PRES. of MGR of P.A.

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of section 607.0505 or 655.0201, Florida Statutes.

L.T.S.C, LLC
(Registered agent accepting appointment)

2/8/19
(Date)

THE FILING OF THIS FORM WITH THE FLORIDA DEPARTMENT OF STATE DOES NOT AUTHORIZE THE ABOVE REFERENCED ENTITY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

FILING FEE \$35

Make checks payable to Florida Department of State and mail to:
Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE FL