

MD4000003164

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(Address)

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(Business Entity Name)

(Document Number)

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14 AUG 11 PM 3:15

LLC RA/RO change

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** C&T Investment Properties, 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:

Jen Newell  
Name of Person

C&T Investment Properties LLC  
Firm/Company

620 Sigman Rd. NE Ste. 400  
Address

Conyers, GA 30013  
City/State and Zip Code

jnewell@bannersecurity.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jen Newell at ( 770 ) 922-6720  
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: **Payment already submitted.**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

14 AUG 11 PM 4:17

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

July 23, 2014

JEN NEWELL  
C&T INVESTMENT PROPERTIES, LLC  
620 SIGMAN RD., NE STE 400  
CONYERS, GA 30013 US

SUBJECT: C&T INVESTMENT PROPERTIES, LLC  
Ref. Number: M04000003164

We have received your document for C&T INVESTMENT PROPERTIES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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.

Tina D Carter  
Regulatory Specialist

Letter Number: 914A00015770

**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: C&T Investment Properties LLC

2. (a) 17320 Panama City Prkwy #101 (b) 620 Sigman Rd. NE #400

Principal office address of limited liability company: (Note: **MUST BE STREET ADDRESS**) Mailing address of limited liability company: (Note: **MAY BE POST OFFICE BOX**)

PCB, FL 32413 Conyers, GA 30013

3. 08-09-2004 Date of filing/registration in Florida 4. M04000003164 Document number

5. (a) Agents & Corporation, Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

P.O. Box 511  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Wilmington DE 19899-0511  
\_\_\_\_\_, FL

(b) 20/20 Real Estate Services  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

17320 Panama City Parkway #101  
NEW Registered Office Address:  
PCB, FL 32413  
\_\_\_\_\_, FL

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
14 AUG 11 PM 3:15

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.

Onnie N. Spann  
Signature of a member or authorized representative of a member

ONNIE N. SPANN  
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.*

[Signature]  
Signature of Registered Agent