## M05000004605

(Requestor's Name)	
(Address)	
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(1888-835)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
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(Document Number)	
Certified Copies Certificates of Status	
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November 22, 2005

GLEN C. ABBOTT GLEN C. ABBOTT, ATTORNEY 109 N.E. 4TH STREET CRYSTAL RIVER, FL 34429

SUBJECT: WILL-MONT GROUP, L.L.C.

Ref. Number: M05000004605

We have received your document for WILL-MONT GROUP, L.L.C. 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 an LLC. Please complete and return the enclosed LLC form.

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) 245-6958.

Lee Rivers Document Specialist

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Letter Number: 705A00068841

## **COVER LETTER**

<b>TO:</b> Registration Section Division of Corporations	
SUBJECT: WILL-MONT GROUP (Name of	of Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registere	ed Office Change and fee(s) are submitted for filing.
Please return all correspondence concerni	ing this matter to the following:
Glen C. Abbott, Esq. (Name of Person)	· · · · · · · · · · · · · · · · · · ·
(Firm/Company) 109 N.E. 4th Street	SECREL 13
Crystal River, FL 34429	FF SI
(City/State and Zip Code)	DA S
For further information concerning this m	natter, please call:
Glen C. Abbott	at (352 ) 795-5699
(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 follow	ving 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 608.416 or 608.508, 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. The name of the limited liability company is:	Will-Mont Group, L.L.C.
2. The mailing address of the limited liability cor	npany is : 18940 Harbeson Road, Harbeson, DE
19951	
08/17//2005	M05000004605
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the register Florida Department of State:	
Gien C. Abbott,	Name
_706 N. Suncoast	Blvd.
	Address 55
Crystal River, FL	34423 State and Zip
6. The name and address of the new registered age	ω 🖟
o. The name and address of the new registered ago	mg 2
Glen C. Abbott, Es	g
	ame Signature
109 N.E. 4th Street	to be tally and
riorida street address	(P.O. Box NOT acceptable)
Crystal River	FL 34423
City, Sta	ate and Zip
and the business office of the registered agent wil liability company, it is hereby confirmed that the of the members of the limited liability company or the operating agreement of the limited liability.	de, the Florida street address of the registered office
(Signature of a member or authorized represeptative of a member	· ·
Norman Montgomery, Manager (Printed or typed name of signee)	
I hereby accept the appointment as registered age comply with the provisions of all statutes relative and I am familiar with and accept the obligations Chapter 608, F.S. Or, if this document is being fix address, I hereby confirm that the Emiled Ligibility	ent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, of my position as registered agent as provided for in led to merely reflect a change in the registered office company has been notified in writing of this change.
(Signature of Registered Agent)	<del></del>
Division of Cornerations PO	Roy 6327 Tallahassaa El 32314

**FILING FEE: \$25.00** 

INHS18 (8/05)