

L 18000026774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

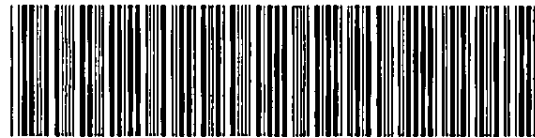
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MAR 15 2019

FILED
19 MAR -4 PM 12:51
CLERK OF COURT
JANET L. BROWN

R/A-elt

John B. Trawick

Attorney • Counselor • Litigator

February 28, 2019

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

RE: Change of Registered Agent for Azure Aqua Endeavors, Arcadia
ICR LLC and Arcadia ICR Group, LLC

To Whom it May Concern:

Please find enclosed a change of registered agent for each of the following corporations:

- Azure Aqua Endeavors
- Arcadia ICR LLC
- Arcadia ICR Group, LLC

Also, please find enclosed our firm's check number 5283 in the amount of \$75.00 for the filing fee for each of these. Please file each of the changes for registered agent.

If you have any questions, please do not hesitate to contact our office. Thank you for your assistance with this matter.

Sincerely,

/s/ John B. Trawick

John B. Trawick

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Azure Aqua Endeavors

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:

John Trawick

Name of Person

John B. Trawick PLLC

Firm/Company

139 E. Government Street

Address

Pensacola, FL 32502

City/State and Zip Code

john@jbtrawicklaw.com

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

For further information concerning this matter, please call:

John Trawick

Name of Person

850

at ()

476-0495

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:

☒ \$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: Azure Aqua Endeavors LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

3355 Addison Drive, Suite B

Pensacola, FL 32514

01/30/2018

L18000026774

3. Date of filing/registration in Florida

4. Document number

5. (a) Litvak, Kramer A.

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

226 E. Government Street

Pensacola, FL 32502

(b) John Trawick

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

NEW Registered Office Address:

139 E. Government Street

Pensacola, FL 32502

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.

Eric T. Alford
Signature of a member or authorized representative of a member

Eric T. Alford

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 of Registered Agent

FILED
19 MAR -4 PM 12:51
TALLAHASSEE, FL
STATE OF FLORIDA
DIVISION OF CORPORATIONS