657002

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(only-only-none n)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Sacricos Entry Name)	
(Dagumant Number)	
(Document Number)	
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SECRETARY OF STATE

FEB 0:3, 2016

T. LEMIEUX

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: LARRY McLEN Name of Corpor	nore, INC
DOCUMENT NUMBER: 657002	
The enclosed Statement of Change of Registered Office/Ag	ent and fee are submitted for filing.
Please return all correspondence concerning this matter to the	he following:
RICHARD L. COX	TR Person
Name of Contact	Person
LARRY MELEM	PORE, INC.
Filli/Compa	ny
17687 Ashler	y Dr.
Panama Lity City/State and Zin	Beach, FL 32413
E-mail address: (to be used for future	annual report notification)
For further information concerning this matter, please call:	
Jacobs. Lehtio at	(850 \ 541-4793
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department	of State.
Mailing Address:	Street Address:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLorida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Larry McLemore, Inc.
2. The principal office address: 17687 Ashley Dr.
Panama City Bch., FL 32413
3. The mailing address (if different): Po Box 9088
Panama City Bch., FL 32417
4. Date of incorporation/qualification: 2/25/1980 Document number: 657002
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Larry McLemore
4019 Princess LN.
Panama City, FL 32405
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
JACOB S. LEHTIO . AS B
17/87 Achley Do Are S
P.O. Box NOT acceptable
Panama City Bch, FL 32413
The street address of its registered office and the street address of the business office of its registered agent, is changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an of ser so authorized by the board, or the corporation has been notified in writing of the change.
Larry ME Le mor e Supparture of an officer or director Larry ME Le mor e Printed or typed name and title
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete verformance of my duties, and I am familiar with and accept the obligation of my position as registered sgent. Of, if this document is being filed merely to reflect a change in the registered office address, I wereby confirm that the corporation has been notified in writing of this change.
1/19/17
Signature of Registered Agent Date
f signing on behalf of an entity:
JACOB S. LEHTIO

* * * FILING FEE: \$35.00 * * *