

A080000000459

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

A. LUNT

MAR - 4 2009

EXAMINER

Office Use Only



600139301716

12/30/08--01023--017 **25.00

03/03/09--01032--005 **10.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 MAR - 2 PM 2:45

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 31, 2008

PEGGY F. CARTER
7967 COUNTY HIGHWAY 280 E
DEFUNIAK SPRINGS, FL 32435

SUBJECT: PAUL AND PEGGY CARTER FAMILY PARTNERSHIP, LTD
Ref. Number: A08000000459

FILED
2009 MAR -2 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for PAUL AND PEGGY CARTER FAMILY PARTNERSHIP, LTD and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

There is a balance due of \$10.00.

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 408A00062126



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 19, 2009

PEGGY CARTER
7967 COUNTY HWY 280 E
DE FUNIAK SPRINGS, FL 32435

SUBJECT: PAUL AND PEGGY CARTER FAMILY PARTNERSHIP, LTD
Ref. Number: A08000000459

We have received your document for PAUL AND PEGGY CARTER FAMILY PARTNERSHIP, LTD. However, the document has not been filed and is being returned for the following:

The registered agent must sign accepting the designation.

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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 909A00005962

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 MAR -2 PM 2:45

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TO: Registration Section
Division of Corporations

SUBJECT:

Paul + Peggy Carter Family Partnership, LTD.
(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:

Paul A. or Peggy J. Carter
(Name of Person)

Paul + Peggy Carter Family Partnership, LTD.
(Firm/Company)

7967 Co. Hwy 280 E
(Address)

De Funiak Springs, FL 32435
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 MAR -2 PM 2:46

FILED

For further information concerning this matter, please call:

Paul A. or Peggy J. Carter at (850) 892.2227
(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:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Paul + Peggy CARTER Family Partnership, LTD
Name of Limited Partnership or Limited Liability Limited Partnership

2. 4-21-08
Date of filing/registration in Florida

3. A08000000459
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

New Peggy CARTER
Name
7967 County Hwy 280E
Address
De Funiak Springs FL 32435
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

old → John T. MARSHALL
Name
2000 98 Palms Blvd Suite 110
Florida street address (P.O. Box not acceptable)
Destin, FL 32541
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Peggy Carter
Signature of General Partner

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 an accept the obligations of my position as registered agent.

Peggy Carter
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

2009 MAR -2 PM 2:46
FILED
TALLAHASSEE, FLORIDA
SECRETARY OF STATE