

A930000006708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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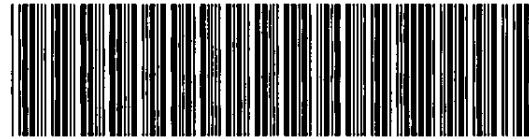
(Business Entity Name)

(Document Number)

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OCT 28 2014
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: John R. Paul Jr. Family Partnership
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A93000000708

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Stacey Tomblin
Contact Person

Car Two
Firm/Company

P.O. box 188
Address

Wauchula FL 33917
City, State and Zip Code

stomblin@car-two.info
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julie Paul Doney at (863) 673-1185
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

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CLERK OF STATE

**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. John R. Paul Jr. Family Partnership
Name of Limited Partnership or Limited Liability Limited Partnership
2. 10-21-14 3. BA9300000708
Date of filing/registration in Florida 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:

John R. Paul Jr.
Name
400 Live Oak Ln.
Address
LaBelle FL 33917
City, State and Zip

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

Julie Paul Obney
Name
1336 Torreyana Cir.
Florida street address (P.O. Box not acceptable)
N. Ft. Myers FL 33917
City, State and Zip

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

Julie P. Obney
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.

Julie P. Obney
Signature of Registered Agent

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

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