

A94000000862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sugg Enterprises, LTD.  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** A94000000862

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:

Kent S. Brown  
Contact Person

Firm/Company

633 Highland Lakes Cove  
Address

Birmingham, AL 35242  
City, State and Zip Code

kbrottraveller@charter.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kent S. Brown at ( 205 ) 991-6342  
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

**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. Sugg Enterprises, LTD.  
Name of Limited Partnership or Limited Liability Limited Partnership
2. 06/27/1994 3. A94000000862  
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:

Nancy S Ward  
Name

786 Chesapeake Drive  
Address

New Port Richey, FL 34689  
City, State and Zip

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

Amelia M. Campbell  
Name

3700 Bank America Plaza 101 E Kennedy Blvd  
Florida street address (P.O. Box not acceptable)

Tampa FL 33602  
City, State and Zip

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

KENT S. BROWN  
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 and accept the obligations of my position as registered agent.*

Amelia M Campbell  
Signature of Registered Agent

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

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2013 AUG 31 PM 1:49  
STATE OF FLORIDA  
CLERK OF THE COURT