

A94 000000 1512

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(Address)

(Address)

(City/State/Zip/Phone #)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: APPLEFIELD FIVE FAMILY LIMITED PARTNERSHIP
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A94000001512

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:

Stephen T. Etheredge

Contact Person

Buntin, Etheredge & Fowler

Firm/Company

P.O. Box 1193

Address

Dothan, AL 36302

City, State and Zip Code

bryan.applefield@wincollc.com

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

For further information concerning this matter, please call:

Stephen T. Etheredge

Name of Contact Person

at (334)

Area Code and Daytime Telephone Number

793-3377

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. Applefield Five Family Limited Partnership
Name of Limited Partnership or Limited Liability Limited Partnership
2. November 9, 1994 3. A94000001512
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:

Bryan Applefield
Name
8701 North Lagoon Drive
Address
Panama City Beach, FL 32407
City, State and Zip

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

Edward Applefield
Name
211-Lakeshore Dr. 21228 S. Lakeview DR
Florida street address (P.O. Box not acceptable)
Panama City Beach FL 32413
City, State and Zip

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

Bryan M Applefield
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.

Edward Applefield
Signature of Registered Agent

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

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