

A96000001109

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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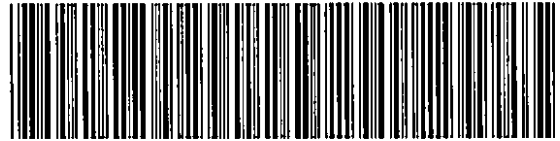
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Southport Ranch, Ltd
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A96000001109

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:

Gary L. Lee
Contact Person

Southport Ranch, Ltd
Firm/Company

16550 NW 144th Ave
Address

Okeechobee, FL 34972
City, State and Zip Code

agrivest@msn.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary Lee at (407) 973-4260
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. Southport Ranch, Ltd.
Name of Limited Partnership or Limited Liability Limited Partnership

2. 06/10/1996
Date of filing/registration in Florida

3. A96000001109
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:

Gary L. Lee
Name

4900 Kelley Ln
Address

Kissimmee, FL 34759
City, State and Zip

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

Gary L. Lee
Name

16550 NW 144th Ave
Florida street address (P.O. Box not acceptable)

Okeechobee, FL FL 34972
City, State and Zip

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

Gary L. Lee
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.

Gary L. Lee
Signature of Registered Agent

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

REC-171045