

**LC1000003106**

*Greenburg & Truig*  
Requestor's Name

Address

City/State/Zip

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in    ☐ Pick up time \_\_\_\_\_    ☐ Certified Copy  
☐ Mail out    ☐ Will wait    ☐ Photocopy    ☐ Certificate of Status

FILED

02 APR 29 PM 2:57 RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA 02 APR 29 PM 12:26

NEW FILINGS	
	Profit
	NonProfit
	Limited Liability
	Domestication
Name	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
Document	Annual Report DCC
Update	Fictitious Name
Verify	Name Reservation DCC
Acknowledgement DCC	
W. P. Verifier DCC	

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

100005369751--1  
-04/29/02--01081--022  
\*\*\*\*\*25.00 \*\*\*\*\*25.00

Examiner's Initials

*LC1000003106*

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the limited liability company is: RAND YARD PARTNERS, LLC
2. The mailing address of the limited liability company is : PMB Box 354, 1982 S.R. 44,  
New Smyrna Beach, FL 32168
3. Date of filing/registration in Florida February 28, 2001
4. Document number L01000003106

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

Laurence C. Hames

Name

215 North Eola Drive

Address

Orlando, FL 32801

City, State and Zip

6. The name and address of the new registered agent and/or office:

Harold G. Hartsock

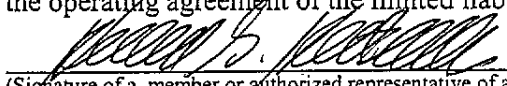
1311 2nd Street

Florida street address (P.O. Box NOT acceptable)

Sanford, FL 32771

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

  
(Signature of a member or authorized representative of a member)

Harold G. Hartsock

(Printed or typed name of signee)

*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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
(Signature of Registered Agent)

Harold G. Hartsock

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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