

LD100000 4131

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DIVISION OF CORPORATIONS
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 3, 2015

ALLISON H. BURNS / LLB MANAGEMENT, LLC
13118 WEXFORD HOLLOW RD N
JACKSONVILLE, FL 32224 US

SUBJECT: LLB MANAGEMENT, L.L.C.
Ref. Number: L01000004131

We have received your document for LLB MANAGEMENT, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 615A00006664

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

LFB MANAGEMENT, LLC.

1. Name of the limited liability company:

2. (a) 13118 Weyford Hollow Rd N, 4745 Sutton Park Ct 805

Principal office address of limited liability company:

Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

(Note: MUST BE STREET ADDRESS)

Jacksonville FL

Jacksonville FL

32224

32224

3/16/01

LO1000004131

Date of filing/registration in Florida

Document number

5. (a) BRENNAN, MANNA & DIAMOND P.L.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

76 South Laura Street

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Suite 1700

Jacksonville FL

(b) Gunster, Yonkley & Stewart, PA

Enter name of NEW Registered Agent and/or NEW Registered Office address:

ONE Enterprise, 225 Water St #1750

NEW Registered Office Address:

Jacksonville FL

Jacksonville FL

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

Printed or typed name of signer

Lisa Buckner, President

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 605, 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

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

FILING FEE: \$25.00

INH518 (2/14)

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