

LO1000015978

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

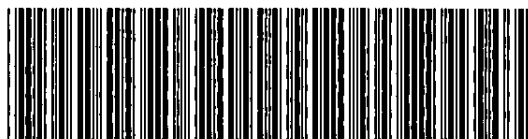
(Document Number)

Certified Copies _____ Certificates of Status _____

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03 NOV - 6 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

M. THOMAS

NOV - 7 2008

EXAMINER

ROBERT J. GORMAN & ASSOCIATES, P.A.

A Professional Association
1209 Delaware Avenue
Fort Pierce, Florida 34950-4049
(772)465-5311
(772)465-5722 Fax

Robert J. Gorman, Esquire
Michael P. McSoley, Esquire
Kristin P. Helser, Esquire

Courthouse Box 113 (SLC)

<input type="checkbox"/> U.S. Mail	<input type="checkbox"/> Fax Transmission @ _____ .m.	<input type="checkbox"/> Certified Mail	<input type="checkbox"/> Overnight Delivery	<input type="checkbox"/> Hand Delivery
()	Pages _____	<input type="checkbox"/> E-mail _____	<input type="checkbox"/> Pick Up	

October 31, 2008

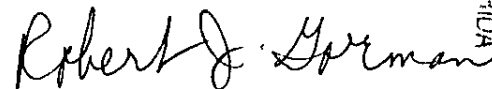
Florida Department of State
Post Office Box 6327
Tallahassee, FL 32314

Re: O & W HOLDINGS, LLC

Gentlemen:

Enclosed is the original Change of Registered Office and Agent to be filed in the above matter as well as our check to cover the cost of this filing and a certified copy. Also enclosed is a self addressed envelope for returning the certified copy.

Very truly yours,


Robert J. Gorman

/jef

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: O & W HOLDINGS, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stanley Oginz
(Name of Person)

O & W Holdings, LLC
(Firm/Company)

3326 Orange Avenue
(Address)

Fort Pierce, Florida 34947
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert J. Gorman at (772) 465-5311
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 NOV - 6 AM 10:09

FILED

**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. Name of the limited liability company: O & W HOLDINGS, LLC

2. (a) Principal office address of limited liability company: 3326 ORANGE AVENUE
(Note: MUST BE STREET ADDRESS) FORT PIERCE, FLORIDA 34947

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

09/18/2001

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3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: DAVID WARNER

Registered Office Address: 5203 DEER RUN DRIVE
FORT PIERCE, FLORIDA 34951

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

NEW Registered Agent: Robert J. Gorman

NEW Registered Office Address: 1209 Delaware Ave.
(MUST BE FLORIDA STREET ADDRESS) FT. Pierce, FL 34950

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.

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

Stanley Oguz
(Printed or typed name of signer)

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.

Robert J. Gorman
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE