

W020000002002

Kerry Williams

(Requestor's Name)

542 S. Edgewood Ave

(Address)

Jacksonville, FL 32205

(Address)

(City/State/Zip/Phone #)

☐

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**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: Orion Empire, LLC

2. The mailing address of the limited liability company is: \_\_\_\_\_

542 S. Edgewood Ave Jacksonville FL 32205

01/23/2002  
3. Date of filing/registration in Florida

40200002002  
4. Document number

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

Barry Ansbacher PA  
Name  
1301 Riverplace Blvd. 2450 Riverplace Twr.  
Address  
Jacksonville FL 32207-9037  
City, State and Zip

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

Howard Caplan, Attorney, PA  
Name  
6260 Dupont Station Court Suite C  
Florida street address (P.O. Box NOT acceptable)  
Jacksonville FL 32217  
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.

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

Kerry Williams  
(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]  
(Signature of Registered Agent)

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