

LO2000015150

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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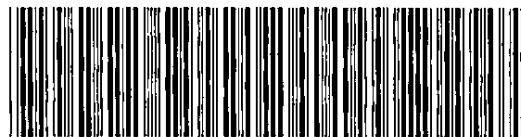
(Business Entity Name)

(Document Number)

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July 3, 2017

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

Re: F. McRae Investments, LLC. Document No.: L02000015150

To Whom It May Concern:

For the above referenced corporation, enclosed please find the following:

1) Cover Letter and Statement of Change of Registered Office or Registered Agent or both for Corporation

2) Check No.: 1159 in the amount of \$25.00

Please process the above referenced forms to change the *principal office address and the* registered agent's *office address.*

If you have any questions, please call me directly at 850-372-6151. Thank you.

Sincerely,

Stacy L. Walters, FRP
Paralegal to General Counsel

Graceville
850.263.2056

Bristol
850.643.2238

Brookhaven
601.833.1990

Corporate
850.263.4457

/s/

Enclosures (as stated)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: F. McRae Investments, 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:

Frank E. Bondurant

Name of Person

Firm/Company

P. O. Box 7

Address

Graceville, FL 32440

City/State and Zip Code

swalters@rex-lumber.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank E. Bondurant at (850) 372-6150
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

**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.

1. Name of the limited liability company: F. McRae Investments, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

5381 Cliff Street

P. O. Box 7

Graceville, FL 32440

Graceville, FL 32440

06/18/2002

L02000015150

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:

Frank E. Bondurant, Esq.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1820 Highway 2 East

Graceville, FL 32440

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

NEW Registered Office Address:

5381 Cliff Street

Graceville, FL 32440

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.

Caroline Dauzat

Caroline Dauzat, Manager

Signature of a member or authorized representative of a member

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 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.

Frank E. Bondurant

Signature of Registered Agent

17 JUL 11 AM 7:05
STATE OF FLORIDA
FALL COUNTY CLERK