

# L03000000773

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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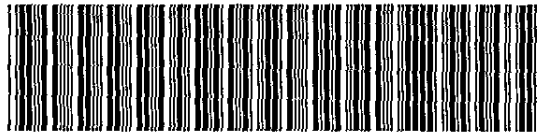
(Business Entity Name)

(Document Number)

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03 JUN 16 AM 8:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RA Change

**MEMORANDUM  
FROM  
STAN W. HILL**

Wood Treaters, LLC, P. O. Box 41604, Jacksonville, Florida 32203-1604  
904-358-2507, Fax 904-353-4125  
stan@woodtreaters.com

**DATE:** June 4, 2003  
**TO:** Mr. Norman Woerner  
**SUBJECT:** Change in the Registered Agent for Wood Treaters, LLC

Attached is the form necessary to change the registered agent for WTLLC as we discussed during your visit Monday.

Your signature is required above your typed name. After you sign this, please mail it in the enclosed envelope. Thanks.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: Wood Treaters LLC
2. The mailing address of the limited liability company is : 2610 Fairfax Street  
Jacksonville, FL 32209
- January 8, 2003 L03000000773
3. Date of filing/registration in Florida 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:

Robert J. Gronek, G & L Agent Services, Inc.  
Name  
390 North Orange Ave., Suite 600  
Address  
Orlando, FL 32801  
City, State and Zip

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

Stan W. Hill  
Name  
2610 Fairfax Street  
Florida street address (P.O. Box NOT acceptable)  
Jacksonville, FL 32209  
City, State and Zip

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**03 JUN 16 AM 8:30**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

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.

Norman L. Woerner  
(Signature of a member or authorized representative of a member)

Norman L. Woerner  
(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.*

Stan W. Hill  
(Signature of Registered Agent)

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