

103000026058

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

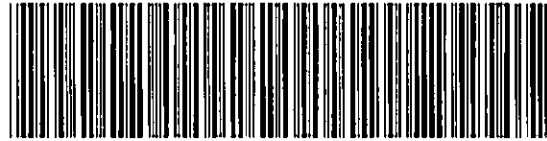
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JAN 16 2019
S. YOUNG

JAN 30 2019
S. YOUNG

RECEIVED
TALLAHASSEE, FLORIDA

19 JAN 28 PM 4:54

FILED



JAN 22 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 16, 2019

RONALD A MOWREY
MOWREY LAW FIRM, P.A.
515 NORTH ADAMS STREET
TALLAHASSEE, FL 32301

SUBJECT: MARINERS LANDING HOMEOWNERS ASSOCIATION PHASE II, LLC
Ref. Number: L03000026058

We have received your document for MARINERS LANDING HOMEOWNERS ASSOCIATION PHASE II, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Shelia H Young
Regulatory Specialist II

Letter Number: 519A00001318

Long
back

2019 JAN 22 PM 2:31

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Mariners Landing Homeowners Association Phase II, 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:

Ronald A. Mowrey

Name of Person

Mowrey Law Firm, P.A.

Firm/Company

515 North Adams Street

Address

Tallahassee, FL 32301

City/State and Zip Code

rmowrey@mowreylaw.com

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

For further information concerning this matter, please call:

Ronald A. Mowrey

Name of Person

850

at ()

222-9482

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: Mariners Landing Homeowners Association Phase II, 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**)

101 South Marine Street

Carrabelle, Florida 32322

7/16/2006

L03000026058

3. _____ 4. _____
Date of filing/registration in Florida Document number

5. (a) Pasztor, Zsuzsanna

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

101 South Marine Street

Carrabelle, FL 32322

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

Ronald A. Mowrey

NEW Registered Office Address:

515 North Adams Street

Tallahassee, FL 32301

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]
Signature of a member or authorized representative of a member

Sam R. Eades
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 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]
Signature of Registered Agent

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