

LO3000040938

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 OCT 13 AM 11:06

N. Culligan OCT 14 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Fox Equipment, 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:

Eric Fox
(Name of Person)

Fox Equipment, LLC
(Firm/Company)

2478 Cimarrone Blvd,
(Address)

Jacksonville, Florida 32259
(City/State and Zip Code)

For further information concerning this matter, please call:

Eric Fox at (904) 292-3960
(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 28, 2005

ERIC FOX
2478 CIMARRONE BLVD.
JACKSONVILLE, FL 32259

SUBJECT: FOX EQUIPMENT, LLC
Ref. Number: L03000040938

We have received your document for FOX EQUIPMENT, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The wrong filing forms were submitted. Enclosed are the proper forms.

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) 245-6067.

Neysa Culligan
Document Specialist

Letter Number: 205A00059102

**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: Fox Equipment LLC
2. The mailing address of the limited liability company is: 2478 Cimarrone Blvd
Jacksonville, Florida 32259
3. Date of filing/registration in Florida 10-24-03 4. Document number L03000040938

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

CORPORATION SERVICE COMPANY
Name
1201 HAYS STREET
Address
TALLAHASSEE, FLORIDA 32301
City, State and Zip

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

ERIC FOX
Name
2478 CIMARRONE BLVD
Florida street address (P.O. Box NOT acceptable)
JACKSONVILLE FL 32259
City, State and Zip

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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 of a member or authorized representative of a member)

ERIC FOX MEMBER
(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.


(Signature of Registered Agent)

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