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SECRETARY OF STATE
TALLAHASSEE, FIRBLE

D. BRUCE

AUG 06 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ		ETOWN WHARF, LLC Limited Liability Company
	Name of E	Stiffied Blabinty Company
Dear	Sir or Madam:	
The e	nclosed Registered Agent/Registered C	Office Change and fee(s) are submitted for filing.
Please	e return all correspondence concerning	this matter to the following:
	JERRY L. WALLACE	
	Name of Person	
	LAKETOWN WHARF, LLC	<u>; </u>
	Firm/Company	
	285 HARBOR BLVD., SUITE Address	<u> </u>
	DESTIN, FL 32541 City/State and Zip Code	SECRETATALLAHA
E	jerrylwallace@gmail.com -mail address: (to be used for future annual report n	otification)
For fu	urther information concerning this matte	er, please call:
	JERRY L. WALLACE	at (850) 259-2886 Area Code & Daytime Telephone Number
	Name of Person 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	ng 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 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.

agent, or both, in the State of Florida.				
1. Name of the limited liability company:	LAKETOWN WHARF, LLC			
2. (a) Principal office address of limited liability compa	any: c/o JERRY L. WALLACE			
(Note: MUST BE STREET ADDRESS)	4458 OCEAN VIEW DRIVE DESTIN, FL 32541			
(b) Mailing address of limited liability company:	c/o JERRY L. WALLACE			
(Note: MAY BE POST OFFICE BOX)	4458 OCEAN VIEW DRIVE DESTIN, FL 32541			
12/08/2003	L03000050891			
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:				
Registered Agent:	DOWD, JOHN R. ESQ.			
Registered Office Address:	285 HARBOR BLVD.			
	DESTIN, FL 32541 产品 😸			
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				
NEW Registered Agent:	JERRY L. WALLACE			
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	DESTIN DE			
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 JERRY L. WALLACE 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 dud accept the obligations of my position as registered agent as provided for in Chapter 108, F.S. Or, this document is being filled to merely reflect a change in the registered office address, thereby confirm that the limited liability company has been notified in writing of this change. Signature of Registered Agenti				
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00				

INHS18 (05/08)