L04000022601

	•	
(Re	equestor's Name)	
•		
(Ac	ddress)	
(Ac	ldress)	
	. *	
(Ci	ty/State/Zip/Phone #	<i>‡</i>)
,	,	(
PICK-UP	` WAIT	MAIL
_	_	
(Bu	siness Entity Name)
	·	•
(Do	ocument Number)	_
Certified Copies	Cartificatos	f Ctatus
Certified Copies	_ Certificates 0	i Status
Special Instructions to	Filing Officer:	l
		,
	•	
		l
·	•	

Office Use Only



200133973912

08/13/08--01012--009 **25.00

08 AUG 13 AM II: 48
SECRETARY OF STATE

COVER LETTER

+

TO: Registration Section Division of Corporations		
SUBJECT: Catamount, L.L.C.		
(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	g this matter to the following:	
. AAr Charles T Winging		
Mr. Charles T. Wiggins (Name of Person)		
Beggs & Lane		
(Firm/Company)		
501 Commendencia Street (Address)		
(Address)		
Pensacola, FL 32502		
(City/State and Zip Code)		
For further information concerning this mat	ter, please call:	
J. Mercer Williams	at (_ 850) 585-5775	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 32301	rananassee, rionda 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.

1. Name of the limited liability company: Catamoun	it, L.L.C.	•
2. (a) Principal office address of limited liability compa (<i>Note: MUST BE STREET ADDRESS</i>)	nny: 3381 Pierce Dairy Road Madison, GA 30650	E
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	3381 Pierce Dairy Road Madison, GA 30650	0 0
· 03/24/2004	L04000022601 3 8	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State: 5	· · · · · · · · · · · · · · · · · · ·
Registered Agent:	Franklin H. Watson, P.A.	1
Registered Office Address:	5365 East County Highway 30-A Suite 105	- Line 1
	Seagrove Beach, FL 32459	Đ
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:	
NEW Registered Agent:	Mr. Charles T. Wiggins	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Beggs & Lane 501 Commendencia Street Pensacola FL 32502	D
If the limited liability company is not organized under the that after the change or changes are made, the Florida stroffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company.	reet address of the registered office and the busine c case of a Florida limited liability company, it is I by an affirmative vote of the members of the lim	ess nited
J. Mercer Williams (Printed or typed name of signee)		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notification.	lagree to act in this capacity. I further agree to broper and complete performance of my duties, and as registered agent as provided for in Chapter a change in the registered office address, I herebyied in writing of this change.	nd I 608, v
(Signature of Registered Agent)		

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