

L04000027028

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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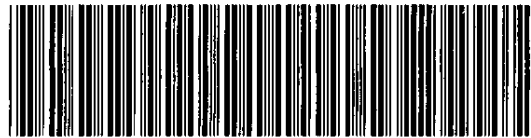
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JUL 14 AM 11:48

T. HAMPTON

JUL 15 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ASPIRANT DEVELOPMENT, 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:

CORY McFARLANE

(Name of Person)

ASPIRANT DEVELOPMENT, LLC

(Firm/Company)

400 CAPITAL CIRCLE SE, #18-174

(Address)

TALLAHASSEE, FLORIDA 32301

(City/State and Zip Code)

For further information concerning this matter, please call:

CORY McFARLANE

(Name of Person)

at (850) 425 - 5029

(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
Division of Corporations

RECEIVED

09 JUL 14 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 9, 2009

CORY MCFARLANE
400 CAPITAL CIR SE
18174
TALLAHASSEE, FL 32301

SUBJECT: ASPIRANT DEVELOPMENT, LLC
Ref. Number: L04000027028

We have received your document for ASPIRANT DEVELOPMENT, 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 009A00012007

**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: ASPIRANT DEVELOPMENT, LLC

2. (a) Principal office address of limited liability company: 400 CAPITAL CIRCLE SE
(Note: **MUST BE STREET ADDRESS**) #18-174
TALLAHASSEE, FLORIDA 32301

(b) Mailing address of limited liability company: 400 CAPITAL CIRCLE SE
(Note: **MAY BE POST OFFICE BOX**) #18-174
TALLAHASSEE, FLORIDA 32301

04/09/2004
3. Date of filing/registration in Florida

L04000027028
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: KNOWLES & RANDOLPH, P.A.

Registered Office Address: 3065 HIGHLAND OAKS TERRACE
TALLAHASSEE, FLORIDA 32301

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

NEW Registered Agent: ~~ASPIRANT DEVELOPMENT, LLC~~ Cory McFarlane

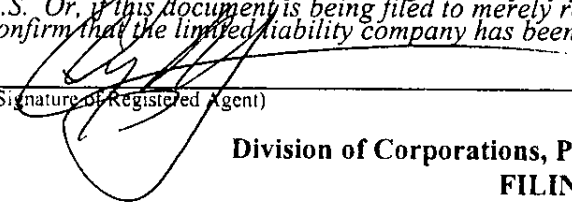
NEW Registered Office Address: 400 CAPITAL CIRCLE SE
(**MUST BE FLORIDA STREET ADDRESS**) ~~#18-174~~ #18-160
TALLAHASSEE, FL 32301

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 of a member or authorized representative of a member)

CORY MCFARLANE
(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.


(Signature of Registered Agent)

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JUL 14 AM 11:48