Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:								
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LLC REGISTERED AGENT CHANGE EAST COAST ICE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

11/9/2012

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CT CORPORATION

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COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: EAST COAST ICE, LLC						
Name o	f Limited Liabi	lity Company				
Dear Sir or Madam:					•	
The enclosed Registered Agent/Registered	Office Change	and fee(s) are	submitted for fil	ling.		
		• •				
Please return all correspondence concerning	ig tnis matte r k	the tollowing;		بن سند	2	
			•		2 3 1/2 1837 - 9	7
Katie Wubker				TANK THE	<u> </u>	
Name of Person				124		1 [T]
Ice House America				THE STATE OF	PH I	
Firm/Company				STATE	₩ ₩	A STATE OF THE PERSON OF THE P
				<u> </u>	වූ	
1597 The Greens Way						
Address						
Jacksonville Beach FL, 32250						
City/State and Zip Code		-	•			
lessie verbless@iashauesanamies assu-						
katic.wubker@iochouseamerica.com E-mail address: (to be used for titlure annual report	notification:					
For further information concerning this ma	·	:				
Katie Wubker	at (704-4022	e e f			
Name of Person		Area Code & Daytin	ne Telephone Numbe	:r		
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:		٠,			
□ \$25 Filing Fee	□ \$5	5 Filing Fee &	Certified Copy			
INHS18 (5/08)						

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VL015 - 11/16/2010 CT System Oxfore

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.

TARY COART I	רם זור				
1. Name of the limited liability company: BAST COAST IC	I SON The Canama Wiles				
2. (a) Principal office address of limited liability compan	y:				
(Note: MUST BE STREET ADDRESS)	Jacksonville, Florida 32250				
(b) Mailing address of limited liability company:	1597 The Greens Way				
(Note: MAY BE POST OFFICE BOX)	Jacksonville, Florida 32250				
07/28/2004	L04000056042				
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:	B&C CORPORATE SERVICES OF CENTRALAPL				
Registered Office Address:	390 NORTH ORANGE AVENUE TO SUITE 1400	į			
	ORLANDO, FL 32801				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent:	C T Corporation System 1200 South Pine Island Road				
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Plantation FL 33324				
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change's of the members of the limited liability company or as othe or the operating agreement of the limited liability company Signature of a member of authorized representative of a member Primed or typed name of signes I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provisions of all statutes relative to the provisions.	Florida street address of the registered office tical. Or, in the case of a Florida limited by was/were authorized by an affirmative vote rwise provided in the articles of organization y.				
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prana I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this accument is being filed to me eddress, I hereby confirm that the limited liability companies of Corporation System. Signature of Registered Agent	oper and complete performance of my duties, sistion as registered agent as provided for in the registered office y here of this change. In the registered office y here of this change. Decial Assistant Secretary				
Division of Corporations, P.O. Box 63 FILING FEE: S.	27, Tallahassee, FL 32314 25.00				

INHS18 (05/08)

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By: