L04000071098

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

*COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: FRAN O'BRIEN, L.L.C.

Name of Corporation

DOCUMENT NUMBER: L04000071093

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

D. Randall Briley, Esq.

Name of Contact Person

Briley & Deal, LLC

Firm/Company

2215 South Third Street, Ste. 101

Address

Jacksonville Beach, FL 32250

City/State and Zip Code

rbriley@jaxrelaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

D. Randall Briley

,904

285-5299

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



September 14, 2012

D. RANDALL BRILEY ESQ BRILEY & DEAL LLC 2215 SOUTH THIRD STREET, STE. 101 JACKSONVILLE, FL 32250

SUBJECT: FRAN O'BRIEN, L.L.C. Ref. Number: L04000071093

We have received your document for FRAN O'BRIEN, L.L.C. and your check(s) totaling \$385.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6051.

Letter Number: 912A00023249

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

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.

Name of the limited liability company:	Fran O'Brien, L.L.C.
2. (a) Principal office address of limited liability	company: 744 Palmera Drive East
(Note: MUST BE STREET ADDRESS)	Ponte Vedra Beach, FL 32082
(b) Mailing address of limited liability compar	y: Post Office Box 3023
(Note: MAY BE POST OFFICE BOX)	Ponte Vedra Beach, FL 32004
9/30/04	L04000071093
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sh	own on the records of the Florida Dept. of State:
Registered Agent:	D. Randali Briley, Esq.
Registered Office Address:	135 Professional Drive, Ste. 101 Ponte Vedra Beach, FL 32082
(b) Enter name of <u>NEW Registered Agent</u> and <u>NEW</u> Registered Agent:	d/or NEW Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRE)	2215 South Third Street, Ste. 101 SS) Jacksonville Beach ,FL32250
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.	
Frances C. O'Brien	
Printed or typed name of signee I hereby accept the appointment as registered age comply with the provisions of all statutes relative t and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being file address, I hereby confirm that the limited Mubility of Registered Agent	nt and agree to act in this capacity Affirther agree to o the proper and complete performance of my duties, of my position as registered agent as provided for in ed to merely reflect a change in the registered office company has been notified in writing of this change.

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