

JUN-02-2008 08:47AM

FROM-

T-433 P.0000003 F-48

L040000086642

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : MATTHEWS & HAWKINS, P.A.
Account Number : J19990000039
Phone : (850) 837-3662
Fax Number : (850) 654-1634

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08 JUN -2 AM 8:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2008 JUN -2 AM 8:00

SECRETARY OF STATE
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REGISTERED AGENT CHANGE

INLET HEIGHTS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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JUN-02-2008 09:47AM FROM-

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Trist Heights, 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:

Kristie Busby

(Name of Person)

Matthews & Hawkins, P.A.

(Firm/Company)

4475 Legendary Drive

(Address)

Destin, FL 32541

(City/State and Zip Code)

For further information concerning this matter, please call:

Kristie Busby

(Name of Person)

at (850) 837-3862

(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

JUN-02-2008 09:47AM FROM-

T-432 P 003/003

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: Inlet Heights, LLC
2. (a) Principal office address of limited liability company: 721 Ashley Drive
(Note: **MUST BE STREET ADDRESS**) Crestview, FL 32536
- (b) Mailing address of limited liability company: 721 Ashley Drive
(Note: **MAY BE POST OFFICE BOX**) Crestview, FL 32536

3. Date of filing/registration in Florida: December 1, 2004
4. Document number: L04000088642

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

Registered Agent: Steven K. Hall
Registered Office Address: 4398 Commons Drive East
Suite 300
Destin, FL 32541

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

NEW Registered Agent: Scott M. Work
NEW Registered Office Address: Mathews & Hawkins, P.A.
(**MUST BE FLORIDA STREET ADDRESS**) 4476 Legendary Drive
Destin FL 32541

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.

Scott M. Work
(Signature of a member or authorized representative of a member)

Authorized Representative
(Printed or typed name of signer)

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.

Scott M. Work
(Signature of Registered Agent)

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

REC-8 (06-08)

FILED
JUN-2 AM 8:16
TALLAHASSEE FLORIDA
DEPT OF STATE