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## **COVER LETTER**

TO:	<b>Registration Section</b>
	Division of Corporations

## HANKINS GROUP, LLC

SUBJECT:

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:

THOMAS E HANKINS

Name of Person

HANKINS GROUP, LLC

Firm/Company 1708 DUNES CLUB PL Address

AMELIA ISLAND, FL. 32034

City/State and Zip Code

tehankins@ccim.net

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

For further information concerning this matter, please call:

THOMAS E HANKINS	407 257-7001 at ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303
Enclosed is a check for the	following amount:
■ \$25 Filing Fee	\$55 Filing Fee & Certified Copy
INHS18 (2/14)	

22 OCT 11 1 AH 5: 43

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	ame of the limited liability co	HANKINS GRC	OUP, LL	С			
2	(a)	1708 DUNES CLUB PL			(b	1708 DUN	ES CLUB PL	
	(4)	Principal office address of ( <i>Note: MUST BE S</i>			(0		Mailing address of limited liability compa (Note: MAY BE POST OFFICE BOX	
		AMELIA ISLAND, FL. 32034				AMELIA I	SLAND, FL. 32034	
		12/01/2004			i	.0400008680	08	
3. 5.	(a)	Date of filing/regist THOMAS E HANKINS	ration in Florida	4.	-		Document number	
	()	Registered Agent and Registered C 9 SOUND POINT COURT	ffice shown on the records o	f the Flo	rida	Dept. of State	- 5: -	
		Registered Office Address (ML	IST BE FLORID <u>A STREET</u>	<u>ADDRI</u>	ESS)	2	-	
		FERNANDINA BEACH	, F	L <sup>32034</sup>			22 OC1	٠
	(b)	THOMAS E HANKINS						
	<u>(-</u> 7	Enter name of <u>NEW Registered A</u>	gent and/or <u>NEW Registere</u>	d Office	add	lress:		
		1708 DUNES CLUB PL					5. 44	
		NEW Registered Office Address:						
		AMELIA ISLAND	, F	L <sup>32034</sup>			-	
ch ag wa	ange ent v is/we	or changes are made, the Flo vill be identical. Or, in the ca	rida street address of the se of a Florida limited 1 ve vote of the members	e regist iability of the l	ere cor imi	d office and npany, it is ted liability	orida, it is hereby confirmed that all d the business office of the register hereby confirmed that the change company or as otherwise provide pany.	red e(s)
		TETHO		T	НО	MAS E HAN	NKINS	
:	Signat	ture of a member or authorized repre-	sentative of a member				Printed or typed name of signee	
pro the to	ovisi e obl. mere	by accept the appointment as ons of all statutes relative to t igations of my position as reg ely reflect a change in the reg d in writing of this chapge.	registered agent and ag he proper and complete istered agent as provide istered office address, l	ree to d e perfor ed for it hereby	nct ma n C coi	in this capa nce of my d hapter 605, nfirm that ti	icity. I further agree to comply wi luties, and I am familiar with and , F.S. Or, if this document is being he limited liability company has b	th the accept g filed een

Signature of Registered Agent

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

DA DEPARTMENT OF STATE		Division of Co
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Detail by Entity	lame	
Florida Limited Liability C		
HANKINS GROUP, LLC		
Filing Information		
Document Number	L040p0086808	
FEI/EIN Number	32-0134078	
Date Filed	12/01/2004	
State	FL	
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Event Date Filed	07/25/2014	22 OCT
Event Effective Date	NONE	
Principal Address		<u> </u>
705 HIGHLANDS COVE	R DR	
107 HIGHLANDS, NC 28741		<b>1 2: ft</b>
Changed: 05/13/2016		
Mailing Address		
74 OSPREY VILLAGE D		
2102	5	
AMELIA ISLAND, FL 320	34	
Changed: 05/13/2016	~ /	
Registered Agent Name &		
HANKINS, THOMAS E		
9 SOUND POINT COUR	S Charyo Pen	enclosed
FERNANDINA BEACH, I		
Name Changed: 04/06/2	18	
Address Changed: 04/06	2018	
Authorized Person(s) Deta	1	
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