

L05000009127

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700253930947

12/13/13--01005--001 **50.00

FILED
13 DEC 13 PM 4:31
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
DEC 16 2013

PETERSON & MYERS, P.A.

ATTORNEYS AT LAW • SINCE 1948

WINTER HAVEN
(863) 294-3360
FAX (863) 299-5498

P.O. Box 1079
LAKE WALES, FLORIDA 33859-1079

100 WEST STUART AVENUE
LAKE WALES, FLORIDA 33853
(863) 676-7611 OR (863) 683-8942
FAX (863) 676-0643

www.PetersonMyers.com

LAKELAND
(863) 683-6511 OR (863) 676-6934
FAX (863) 682-8031

December 4, 2013

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: One Horseshoe Place, L.L.C.
Two Horseshoe Place, L.L.C.

Dear Sir/Madam:

Please find enclosed Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company forms in connection with the above referenced entities. Also enclosed is a check in the amount of \$50.00, representing the \$25.00 filing fee for each. Please provide proof of filing using the enclosed envelope. Should you have any questions, do not hesitate to contact me.

Sincerely,

Joshua K. Brown

JKB/lkm
Enclosures

M. DAVID ALEXANDER, III
JOHN B. ALLEN
PHILIP O. ALLEN
KEVIN A. ASHLEY
JACK P. BRANDON
JOSHUA K. BROWN
DEBRA L. CLINE
J. DAVIS CONNOR

JACOB C. DYKXHOORN
R. DAVID EVANS
DAVID G. FISHER
JOHN R. GRIFFITH
DAVID E. GRISHAM
WILLIAM H. HARRELL
JOHN D. HOPPE

TIMOTHY E. KILEY
KEVIN C. KNOWLTON
DOUGLAS A. LOCKWOOD, III
DAVID A. MILLER
CORNEAL B. MYERS
E. BLAKE PAUL
ROBERT E. PUTERBAUGH

THOMAS B. PUTNAM, JR.
DEBORAH A. RUSTER
STEPHEN R. SENN
ANDREA TEVES SMITH
MATTHEW J. VAUGHN
KEITH H. WADSWORTH



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: One Horseshoe Place, L.L.C.
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:

Joshua K. Brown

Name of Person

Peterson & Myers, P.A.

Firm/Company

100 West Stuart Avenue

Address

Lake Wales, Florida 33859

City/State and Zip Code

jbrown@petersonmyers.com

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

For further information concerning this matter, please call:

Joshua K. Brown

Name of Person

at (863) 676-7611

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

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: One Horseshoe Place, L.L.C.

2. (a) Principal office address of limited liability company: 4421 St Rd 60 W
Lake Wales, Florida 33859
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: Post Office Box 1878
Eaton Park, Florida 33840
(Note: MAY BE POST OFFICE BOX)

01/28/2005

3. Date of filing/registration in Florida

L05000009127

4. Document number

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

Registered Agent: John D. Hoppe

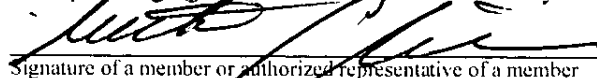
Registered Office Address: 225 E. Lemon Street
Suite 300
Lakeland, Florida 33801

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

NEW Registered Agent: Joshua K. Brown

NEW Registered Office Address: 100 West Stuart Avenue
(MUST BE FLORIDA STREET ADDRESS)
Lake Wales, FL 33859

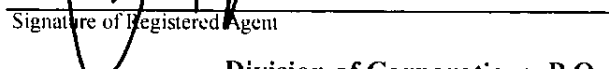
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida 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

Matthew A Childress

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.


Signature of Registered Agent

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