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## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 27, 2013

LYNDA PHELPS 6061 HAMILTON DRIVE FORT MYERS, FL 33905

## SUBJECT: PARK MODEL CITY & RV SALES, LLC Ref. Number: L05000012031

We have received your document for PARK MODEL CITY & RV SALES, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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 (a) (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 013A00022756

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www.sunbiz.org

## COVER LETTER

**TO:** Registration Section Division of Corporations

Hark Model City & RV Sales, Name of Limited Liability Company LC SUBJECT:

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:

el ADA LLC Litu e K Hamilton Address City/State and Zip Code deress: (to be used or future annual report notification) For further information concerning this matter, please call: at ( Area Code & Daytime Telephone Number Name of Person MAILING ADDRESS: **STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations** P.O. Box 6327 **Clifton Building** 

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Enclosed is a check for the following amount:

□ \$25 Filing Fee

2661 Executive Center Circle Tallahassee, Florida 32301

□ \$55 Filing Fee & Certified Copy

Tallahassee, Florida 32314

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

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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: Rek Ma	EL City +RV Sales, LLC.
<ol> <li>(a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)</li> </ol>	Ft. Myers, FI. 33905
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	6061 Hamilton Drive Ft Myers, FL 33905
3. Date of filing/registration in Florida	LO 5000 [ 203 ] 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Lynde Phelps
Registered Office Address:	2008 Bahama 1-142
(b) Enter name of <b><u>NEW Registered Agent</u></b> and/or <u>NEV</u>	W Registered Office address
<b>NEW</b> Registered Agent:	Lynda thelps 5 w
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2008 Bahama Alle a
	FT Myers ,FL 33905

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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

E. -he UNDA. ØS Printed or typed name of signee

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.

ma 7 Signature of Registered Agent

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