

LOS 0000038282

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

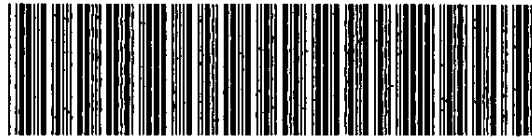
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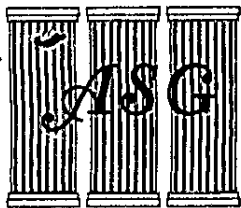
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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EXAMINER



## ANCHORS ♦ SMITH ♦ GRIMSLEY

A PROFESSIONAL LIMITED COMPANY

ATTORNEYS AND COUNSELORS AT LAW

909 MAR WALT DRIVE, SUITE 1014

FORT WALTON BEACH, FL 32547-6711

(850) 863-4064 (850) 862-1138 FAX (850) 664-5728 FAX

WWW.ASGLEGAL.COM

C. LEDON ANCHORS  
JAMES W. GRIMSLEY  
MICHELLE ANCHORS  
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W. SCOTT FOSTER\*  
ANNE M. MCBRIDE  
A. BENJAMIN GORDON\*  
ZACHARY A. VANDYKE\*  
SHIRAZ HOSEIN  
MICHAEL C. RAYBOWN  
JEFFREY L. BURNS  
MATTHEW L. GAETZ

\* ALSO ADMITTED IN ALABAMA

### REPLY TO: MICHELLE ANCHORS

[MANCHORS@ASGLEGAL.COM](mailto:MANCHORS@ASGLEGAL.COM)

PHONE: (850) 863-1974

FAX: (850) 863-1591

LAWRENCE KEEFE  
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RICHARD P. PETERMANN\*  
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TIMOTHY W. SHAW  
JON C. MOYLE, JR.  
VICKI GORDON KAUFMAN

WALTER J. SMITH  
1929-2001

\*\* CERTIFIED CRIMINAL TRIAL  
LAWYER BY THE FLORIDA BAR  
BOARD OF CERTIFICATION

June 30, 2008

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

Re: Poco Mas, LLC

Dear Sir or Madam:

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to my attention at the above address. If you have any questions concerning this matter or need additional information, please do not hesitate to contact my office.

Sincerely,

Anchors Smith Grimsley

*Michelle Anchors, By: neb*

Michelle Anchors

MA:dm

Enclosures

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2008 JUL -2 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# 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: POCO MAS LLC

2. (a) Principal office address of limited liability company: 909 MAR WALT DRIVE, SUITE 1014  
(Note: MUST BE STREET ADDRESS) FORT WALTON BEACH, FLORIDA 32547

(b) Mailing address of limited liability company: 909 MAR WALT DRIVE, SUITE 1014  
(Note: MAY BE POST OFFICE BOX) FORT WALTON BEACH, FLORIDA 32547

10/24/2005

L05000038282

3. Date of filing/registration in Florida

4. Document number

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

Registered Agent:

NORMAN L. RICCI

Registered Office Address:

P. O. BOX 1741  
SANTA ROSA BEACH, FLORIDA 32459

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

NEW Registered Agent:

MICHELLE ANCHORS

NEW Registered Office Address:

909 MAR WALT DRIVE, SUITE 1014

(MUST BE FLORIDA STREET ADDRESS)

FORT WALTON BEACH, FL 32547

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.

Andrew F. Giesen, Jr.  
(Signature of a member or authorized representative of a member)

ANDREW F. GIESEN, JR.  
(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.

Michelle Anchors  
(Signature of Registered Agent)

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

FILED

2008 JUL -2 AM 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** POCO MAS 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:

MICHELLE ANCHORS

(Name of Person)

ANCHORS SMITH GRIMSLEY

(Firm/Company)

909 MAR WALT DRIVE, SUITE 1014

(Address)

FORT WALTON BEACH, FLORIDA 32547

(City/State and Zip Code)

For further information concerning this matter, please call:

MICHELLE ANCHORS

(Name of Person)

at ( 850 ) 863-1974

(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

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TALLAHASSEE, FLORIDA