

L05000064291

(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



700171463287

700171463287
03/08/10--01039--017 **25.00

FILED
10 MAR - 8 PM 3: 50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

MAR - 9 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Townsend Adventures, 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:

Jason Townsend
Name of Person

Townsend Adventures, LLC
Firm/Company

150 S. Walton Lakeshore Dr.
Address

Inlet Beach, FL 32413
City/State and Zip Code

mstadventures@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Misty Townsend at (850) 687-9753
Name of Person 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

FILED
10 MAR - 8 PM 3:50
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: Townsend Adventures, LLC

2. (a) Principal office address of limited liability company: 150 S. Walton Lakeshore Dr.



(Note: MUST BE STREET ADDRESS)

Inlet Beach, FL 32413

(b) Mailing address of limited liability company: same as principal



(Note: MAY BE POST OFFICE BOX)

June 29, 2005

L05000064291

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: Jason Townsend

Registered Office Address: 195 Rivercrest Circle
Santa Rosa Beach, FL 32459

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

NEW Registered Agent: Jason Townsend

NEW Registered Office Address: 150 S. Walton Lakeshore Dr.
(MUST BE FLORIDA STREET ADDRESS)

Inlet Beach, FL 32413

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]
Signature of a member or authorized representative of a member

JASON M. TOWNSEND
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]
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

