

L 05 000075105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

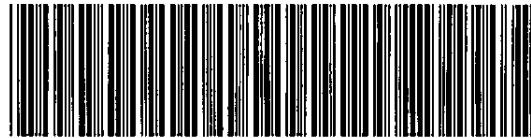
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 2, 2014

HARRY LAWRENCE
1511 PEMBROKE JONES DR.
WILMINGTON, NC 28405

SUBJECT: LAWRENCE PROPERTIES NC LLC
Ref. Number: L05000075105

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(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 call (850) 245-6050.

Darlene Connell
Regulatory Specialist III

Letter Number: 614A00021048

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OFFICE OF
CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lawrence Properties NC LLC

Name of Corporation

DOCUMENT NUMBER: L05000075105

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Harry Lawrence

Name of Contact Person

Firm/Company

1511 Pembroke Jones Drive

Address

Wilmington NC 28405

City/State and Zip Code

hlawren287@earthlink.net

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

For further information concerning this matter, please call:

Harry Lawrence

Name of Contact Person

at 407 865 0983

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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. Name of the limited liability company: LAWRENCE PROPERTIES NC LLC

2. (a) 631 LAKE CATHERINE DRIVE
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

MAITLAND FL 32751

(b) 1571 PEMBROKE JONES DRIVE
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

WILMINGTON NC 28405

3. 08/01/2005
Date of filing/registration in Florida

4. L05000075105
Document number

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

631 LAKE CATHERINE DRIVE
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

MAITLAND FL 32751

_____, FL _____

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

1521 HARRIS CIRCLE
NEW Registered Office Address:

WINTER PARK FL 32789

_____, FL _____

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

HARRY W LAWRENCE MARM
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 605, 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