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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER;

10: Registration Section	• •
Division of Corporations	
Division of Corporations	
	"
SUBJECT: limberlane Mod	oile Home Community, LLC
Name of Limi	ted Liability Company
Dear Sir or Madam:	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
s tous comments and consequences	
Guy W. Norris	
Name of Person	
Normia P Normia D A	
Norris & Norris, P.A.	
Firm/Company	
253 NW Main Blvd.	
Address	
V-4	
Lake City, FL 32055	
City/State and Zip Code	
gnorris@norrisattorneys.com E-mail address: (to be used for future annual report notific	
E-mail address: (to be used for future annual report notific	ation)
For further information concerning this matter, p	olease call:
•	
Guy W. Norris at	(386) 752-7240
Name of Person	
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
	Tallallassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following a	mount:
<u> </u>	
✓ \$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:Timberla	ne Mobile Home Community, LLC		
2. (a) Principal office address of limited liability company	y: 337 SW Tompkins Street		
(Note: MUST BE STREET ADDRESS)	Lake City, FL 32024		
(b) Mailing address of limited liability company:	337 SW Tompkins Street		
(Note: MAY BE POST OFFICE BOX)	Lake City, FL 32024		
11/08/2005	L05000108423		
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:	Guy W. Norris		
Registered Office Address:	253 NW Main Blvd. 全角 图 页		
	Lake City, FL 32055		
(b) Enter name of NEW Registered Agent and/or NE			
<u>NEW</u> Registered Agent:	Patti H. Goodson 5 5		
NEW Registered Office Address: 337 SW Tompkins Street (MUST BE FLORIDA STREET ADDRESS)			
MUSI BE FLURIDA STREET ADDRESS)	Lake City ,FL 32024		
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. Signalure of a member or authorized representative of a member Thereby 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 Tam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S., Or, if his document is being filed to merely reflect a change in the registered office address, thereby confirm that the limited liability company has been notified in writing of this change. Signalure of Registered Agent			
Signature of Registered Agent			

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

INHS18 (05/08)