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**EXAMINER**



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TALLAHASSEE, FLORIDA

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OK to file per MM 1/14

registered agent may be changed by filing the enclosed registered office change form free of charge. Please consider this letter as your 60 days notice that if you do not correct this error by January 7, 2008, your Limited Liability Company will be administratively dissolved. Please send this form back to my personal and confidential attention to ensure the proper filing of this document.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Michelle Milligan  
Document Specialist Supervisor      Letter Number: 507A00064609  
Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida  
32314

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7. LIST, 8. NEXT FILING ON LIST, 9. PREV FILING ON LIST  
ENTER SELECTION AND CR:

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Pearls In Black  
(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:

Wanda C. Moore  
(Name of Person)

Pearls In Black  
(Firm/Company)

73101 Sunnyvale Drive  
(Address)

Twentynine Palms, Ca. 92277  
(City/State and Zip Code)

RECEIVED  
2008 JAN 10 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Wanda Moore at ( 760 ) 367-5921  
(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

**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. The name of the limited liability company is: Pearls In Black

2. The mailing address of the limited liability company is: 73101 Sunnyvale Drive  
Twentynine Palms, Ca. 92277

November 6, 2007  
3. Date of filing/registration in Florida

L060000012625  
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Wanda C. Moore  
Name  
73101 Sunnyvale Drive  
Address  
Twentynine Palms, Ca 92277  
City, State and Zip

6. The name and address of the new registered agent and/or office:

Linda Faye Crowell  
Name  
1015 Richmond Street  
Florida street address (P.O. Box NOT acceptable)  
Tallahassee, FL. 32304  
City, State and Zip

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TALLAHASSEE, FLORIDA

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.

Wanda C. Moore  
(Signature of a member or authorized representative of a member)

Wanda C. Moore  
(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.*

Linda Crowell  
(Signature of Registered Agent)

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