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(R	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Nar	ne)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
ALLAHASSEE FLORIDA



COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Douglas Companies, 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:

Name of Person

Douglas Companies, LLC

Firm/Company

85352 Bostick Wood Drive

Address

Fernandina Beach, FL 32034

City/State and Zip Code

julianamiller@bellsouth.net

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

For further information concerning this matter, please call:

John D. Miller

...904

557-6389

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.

l. Nar	ne of the limited liability company: Douglas Companies, LLC		
2. (a)	Principal office address of limited liability company:	85352 Bostick Wood Drive	
	(Note: MUST BE STREET ADDRESS)	Fernandina Beach, FL 32034	
(b)	Mailing address of limited liability company:	85352 Bostick Wood Drive	
	(Note: MAY BE POST OFFICE BOX)	Fernandina Beach, FL 32034	
06/25/201	0		
3. Dat	e of filing/registration in Florida	Document number	
5. (a)	Registered Agent and Registered Office shown on the	ne records of the Florida Dept. o	of State:
	Registered Agent:	James Shroads	
	Registered Office Address:	914 Atlantic Avenue, Ste. 2E	
	-5,	Fernandina Beach, Ft. 32034	
/L)	Coton name of NEW Decidence According to NEW	7.T3 * 4 . L \(\O	
(0)	Enter name of NEW Registered Agent and/or NEW	Registered Office address:	
	<u>NEW</u> Registered Agent:	John D. Miller	
	NEW Registered Office Address:	85352 Bostick Wood Drive	
	(MUST BE FLORIDA STREET ADDRESS)		
		Fernandina Beach	FL_32034
confirr and the liability the me the ope	imited liability company is not organized under the land that after the change or changes are made, the Flore business office of the registered agent will be identify company, it is hereby confirmed that the change(s) imbers of the limited Mability company or as otherwise trating agreement of the trained kiability company.	arida atropt address of the regist	arad alliaa
John D. M	iller or typed name of signee	•	
		No.	ੇ ਛ ੇ
Therei comply and Ta Chapte addres.	by accept the appointment as registered agent and activity to the provisions of all statutes relative to the promise m familiar with and accept the obligations of my posit 608. J.S. Or, if this document is being filed to mers. I hereby confirm that the limited liability company	ree to act in this capacity. I fai per and complete performance ition as registered agent as bro ition as registered agent as bro ely reflect a change in the regis has been notified in writing of	other agree to of ne duties, vides for in investigation investigation in investigation i
Signatur	e y Registered Agent	771 771 771	¥ !!!
(Division of Corporations, P.O. Box 632		သ <u>ှ</u> မ