## L06000037404

2006 MAY 12 P 1: 21
(Requestor's Name) HASSEE, FLORIDA
(Requestors Name) HASSEE, FLORIDA
·
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Document Number)
,,
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·
, (AD <b>T</b> ;
TAB!
*

Office Use Only



900074172409

05/12/06--01029--006 \*\*25.00

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUPPLIED LEGENINADY CONDI	FISHING LLC 2006 MAY 12 P 1: 2:
SUBJECT: LEGENDARY SPORT (Name of L	imited Liability Company)  SECRETARY OF STATE  TALLAHASSEE, FLORIDA
Dear Sir or Madam:	FLORIDA
The enclosed Registered Agent/Registered O	office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
JASON DUDLEY (Name of Person)	·
LEGENDARY SPORT FISHING (Firm/Company)	6,LLC
160 KNOTS PLACE (Address)	
DESTIN FL 32541 (City/State and Zip Code)	,
For further information concerning this matter	er, please call:
JASON DUDLEY (Name of Person)	at ( <u>850</u> ) <u>803-2808</u> (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	g 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: LEBENDARY SPORT FISHING, LLC ED
2 The mailing address of the limited liability company is: 160 Knors PLACE MAY 12 5.
DESTIN FL 3254 TARY OF STATE  04/11/2006  LOGODO 3740A
DESTIN , FL 3754 TARY OF STATE  04/11/2006  LOGO0003740A
3. Date of filing/registration in Florida 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:
CHARLES MCPEAK Name
1/02 Knock PIACE
162 Knots PLACE. Address
DESTIN FL 32541 City. State and Zip
6. The name and address of the new registered agent and/or office:
JASON Dudley  Name  160 KNOTS PLACE
Name  160 KNATS PLACE
Florida street address (P.O. Box NOT acceptable)
TYESTINI EL 32541
DESTIN FL 3254 City, State and Zip
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 of a member or authorized representative of a member)
TASON DUDLEY (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 508, 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 of Registered Agent)
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

**FILING FEE: \$25.00**