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| · (Requestor's Name) | | |
|---|--|--|
| (Address) | | |
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | | |
| (Business Entry Hame) | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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COVER LETTER

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| TO: Registration Section Division of Corporations | | |
|--|---|--|
| SUBJECT: EMERALD COAST REAL ESTATE SERVICES, 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: | | |
| Tommy L. Warthan (Name of Person) | | |
| EMERALD COAST REAL ESTATE SERVICES, LL (Firm/Company) | .c | |
| 200 KRAFT AUL | | |
| PANAMA CITY FL 32401 (City/State and Zip Code) | | |
| For further information concerning this matter, please call: | | |
| TOMMY WARTHAN (Name of Person) | at (<u>850</u>) <u>596 - 2077</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 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.

| 2 | |
|--|--|
| 1. Name of the limited liability company: EMERALD | COAST REAL ESTATE SERVICES, LLG |
| 2. (a) Principal office address of limited liability compared (Note: MUST BE STREET ADDRESS) | ny: 200 KRAFT AU-C PANAMA City FL 32461 |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | JOS KLAPT AUG PANAMIN CHY EC 32401 |
| 09/05/2006 | L06000087147 |
| 3. Date of filing/registration in Florida | 4. Document number |
| 5. (a) Registered Agent and Registered Office shown or | n the records of the Florida Dept. of State: |
| Registered Agent: | Timothy C. Campbell, Attorney at Law PA |
| Registered Office Address: | 228 East 4th Street PANAMA CITY, FL 32401 |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW Registered Agent</u> : | EW Registered Office address: 55 |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | PANAMA CITY AVE PANAMA CITY ,FL 3346/ |
| If the limited liability company is not organized under the that after the change or changes are made, the Florida streoffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company. Signature of a member or authorized representative of a member) | eet address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited |
| Tommy L. Warthan (Printed or typed name of signee) | <u> </u> |
| I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my positions. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notification. | agree to act in this capacity. I further agree to proper and complete performance of my duties, and I may not a registered agent as provided for in Chapter 608, a change in the registered office address, I hereby ed in writing of this change. |
| (Signature of Registered Agent) | |

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