

LO6000094992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

LO6-94992

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

NRC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: San Juan Peaks, 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:

Curtis Moore

(Name of Person)

San Juan Peaks, LLC

(Firm/Company)

8101 E. Prentice Avenue, Suite 400

(Address)

Greenwood Village, CO 80111

(City/State and Zip Code)

For further information concerning this matter, please call:

Curtis Moore

(Name of Person)

at (303)

694-0204

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 25, 2007

CURTIS MOORE
8101 E. PRENTICE AVENUE
SUITE 400
GREENWOOD VILLAGE, CO 80111

SUBJECT: SAN JUAN PEAKS, LLC
Ref. Number: L06000094992

We have received your document for SAN JUAN PEAKS, LLC and your check(s) totaling \$250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document number listed on the document does not match our records. A change of Registered Agent/Office was filed on 02/02/07 (see printout).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Document Specialist

Letter Number: 607A00036533

**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: San Juan Peaks, LLC
2. The mailing address of the limited liability company is : 8101 E. Prentice Avenue, Suite 400
Greenwood Village, CO 80111

9/28/2006

L06000094992

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:


James H. Forrester
Name
1429 Colonial Blvd. Ste 201
Address
Ft. Myers, FL 33907
City, State and Zip

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

Jim Forrester
Name
1429 Colonial Blvd, #201
Florida street address (P.O. Box **NOT** acceptable)
Fort Myers FL 33907
City, State and Zip

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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.

 as Pres. of Roscommon Investments, LLC, Member
(Signature of a member or authorized representative of a member)

Curtis H. Moore
(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 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.


(Signature of Registered Agent)

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