

LOG 000096506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

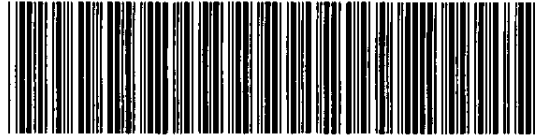
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS

JAN 7 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: McCANE PROPERTIES & INVESTMENTS 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:

KERRY DELAY McCANE
(Name of Person)

McCANE PROPERTIES & INVESTMENTS
(Firm/Company)

5551 ROCK DOVE DR.
(Address)

SARASOTA FL 34241
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

KERRY DELAY McCANE at (941) 926-8526
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 25, 2008

KERRY DELAY MCCANE
5551 ROCK DOVE DRIVE
SARASOTA, FL 34241

SUBJECT: MCCANE PROPERTIES & INVESTMENTS LLC
Ref. Number: L06000096506

We have received your document for MCCANE PROPERTIES & INVESTMENTS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6097.

Marsha Thomas
Regulatory Specialist II

Letter Number: 808A00058389

08 JAN -6 PM 2:50
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. Name of the limited liability company: MCANE PROPERTIES & INVESTMENTS LLC

2. (a) Principal office address of limited liability company: 5551 ROCK DOVE DR
(Note: **MUST BE STREET ADDRESS**) SARASOTA FL 34241

(b) Mailing address of limited liability company: 5551 ROCK DOVE DR
(Note: **MAY BE POST OFFICE BOX**) SARASOTA FL 34241

SEPT 30 2006
3. Date of filing/registration in Florida

L06000096506
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

KERRY DELAY McCANE

Registered Office Address:

4489 CINNAMON DR.
SARASOTA FL 34238

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

KERRY DELAY McCANE

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

5551 ROCK DOVE DR.
SARASOTA FL 34241

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.

Kerry Delay McCane
(Signature of a member or authorized representative of a member)

KERRY DELAY McCANE
(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.

Kerry Delay McCane
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00