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JB



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 11, 2007

JAMES J. HETHER, D.C.
JAMES J. HETHER, D.C., P.L.
2719 SOUTH WOODLAND BLVD.
DELAND, FL 32720

SUBJECT: JAMES J HETHER DC PL
Ref. Number: L06000102071

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We have received your document for JAMES J HETHER DC PL and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

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) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 807A00059826

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: James J. Hether, D.C., P.L.
(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:

James J. Hether, D.C.
(Name of Person)

James J. Hether, D.C., P.L.
(Firm/Company)

2719 South Woodland Blvd
(Address)

Deland, FL 32720
(City/State and Zip Code)

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For further information concerning this matter, please call:

James J. Hether, D.C. at (386) 734-0702
(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
\$35 already sent.

☐ \$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: James J. Hether, D.C., P.L.
2. The mailing address of the limited liability company is: 2719 South Woodland Blvd.
De Land, FL 32720
3. Date of filing/registration in Florida 10-19-2006
4. Document number LD6000102071

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: E Robert Branch

State: E Robert Branch
James J. Hether, D.C., P.T.
Name
301 Harms Way 345 Clyde Morris Blvd
Address Suite 460
Port Orange FL 32129
City, State and Zip Ormond Beach, FL 32130

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

James J. Hether, D.C.
Name
2719 South Woodland Blvd
Florida street address (P.O. Box **NOT** acceptable)
DeLand, FL 32720
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] managing member
(Signature of a member or authorized representative of a member)

James J. Hether, D.C.
(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)

FILING FEE: \$25.00

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