

LO6000 103326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

NOV 18 2008

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TCB PLUMBING, 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:

Leonora E. Tyree  
(Name of Person)

John R. Green, P.A.  
(Firm/Company)

PO Box 349  
(Address)

Panama City, FL 32402  
(City/State and Zip Code)

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08 NOV 17 PM 12:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Leonora E. Tyree at ( 850 ) 215-3610  
(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

**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: TCB PLUMBING, LLC

2. (a) Principal office address of limited liability company: 207 East 3rd Street  
**(Note: MUST BE STREET ADDRESS)** Lynn Haven, FL 32444

(b) Mailing address of limited liability company: ~~5112 Kenrick Street~~ 5112 KENORICK ST.  
**(Note: MAY BE POST OFFICE BOX)** Parker, FL 32404

10-23-06

L06000103326

3. Date of filing/registration in Florida

4. Document number

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

Registered Agent: Sidney A Tilley

Registered Office Address: 104 Joy Circle  
Panama City, FL 32405

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

NEW Registered Agent: Jesse Ost

NEW Registered Office Address: ~~5112 Kenrick Street~~ 619 Hwy 2297  
**(MUST BE FLORIDA STREET ADDRESS)** Parker PANAMA CITY, FL 32404 FL 32404

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.

Jesse Ost  
(Signature of a member or authorized representative of a member)

Jesse Ost  
(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.*

Jesse Ost  
(Signature of Registered Agent)

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