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**EXAMINER** 



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SECRETARY OF STATE DIVISION OF CORPORATION

## **COVER LETTER**

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TO: Registration Section Division of Corporations		
SUBJECT: Cobblestone Park 111, LLC (Name of Lim	ited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office O	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Bruce R. Abernethy, Jr.  (Name of Person)	<del></del>	
Bruce R. Abernethy, Jr., P.A. (Firm/Company)		
500 Virginia Ave., Suite 202		
(Address)		
Fort Pierce, FL 34982		
(City/State and Zip Code)	·	
For further information concerning this matter, ple	ase call:	
Bruce R. Abernethy, Jr. at (	772 ) 489-4901	
(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 amo	ount:	
<b>☑</b> \$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: Cobble	stone Park 111, LLC	B	
2. (a) Principal office address of limited liability con (Note: MUST BE STREET ADDRESS)	mpany: 2920 S.W. Mapp Road Palm City, FL 34990	any: 2920 S.W. Mapp Road Palm City, FL 34990	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2920 S.W. Mapp Road Palm City, FL 34990		
11/09/2006  3. Date of filing/registration in Florida	L06000109502 4. Document number	OB SEP	
5. (a) Registered Agent and Registered Office show	n on the records of the Florida D	ept. of State:	
Registered Agent:	Bruce R. Abernethy, Jr.	<b></b>	
Registered Office Address:	500 Virginia Ave., Suite 202 Fort Pierce, FL 34982	ORATIONS 2: 04	
(b) Enter name of <u>NEW Registered Agent</u> and/or	r <u>NEW Registered Office addre</u>		
NEW Registered Agent:	Ronald W. Kelleher, Jr.	Ronald W. Kelleher, Jr.	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5488 S.W. Longspur Lane		
	Palm City	FL 34990-8829	
If the limited liability company is not organized under that after the change or changes are made, the Florida office of the registered agent will be identical. Or, in hereby confirmed that the change(s) was/were authorisability company or as otherwise provided in the articlimited liability company.  (Signature of a member or authorized representative of a member)	street address of the registered of the case of a Florida limited liab	ffice and the business	
Ronald W. Kelleher, Jr.			
(Printed or typed name of signee)			
I hereby accept the appointment as registered agent of comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my post. S. Or, if this bodyment is being filed to merely reflections that the limited liability company has been not be the confirm that the limited liability company has been not be the confirm that the limited liability company has been not be the confirm that the limited liability company has been not be the confirm that the limited liability company has been not be the confirm that the limited liability company has been not be the confirmation of the confi	and agree to act in this capacity. he proper and complete performa sition as registered agent as prov ect a change in the registered offi stified in writing of this change.	I further agree to Ince of my duties, and I ided for in Chapter 608, ce address, I hereby	
/Simple of Business A State			

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