

LD1000002856

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

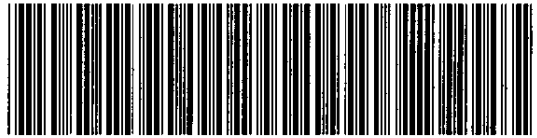
Special Instructions to Filing Officer:

L. SELLERS

SEP 28 2009

EXAMINER

Office Use Only



500159214685

08/10/09--01009--028 **35.00

FILED
09 SEP 22 PM 3:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Walraven Masonry 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:

Valerie Walraven
Name of Person

Walraven Masonry LLC
Firm/Company

3645 Muldoon Road
Address

Pensacola, FL 32526
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Valerie Walraven at (850) 501-1792
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

August 18, 2009

VALERIE WALRAVEN
3645 MULDOON ROAD
PENSACOLA, FL 32526

SUBJECT: WALRAVEN MASONRY LLC
Ref. Number: L07000002856

We have received your document for WALRAVEN MASONRY 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):

The form you submitted is for a LIMITED PARTNERSHIP, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 609A00028003



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 2, 2009

VALERIE WALRAVEN
3645 MULDOON ROAD
PENSACOLA, FL 32526

SUBJECT: WALRAVEN MASONRY LLC
Ref. Number: L07000002856

We have received your document for WALRAVEN MASONRY 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):

The NEW registered agent must sign.

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 909A00029439

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: Walraven Masonry LLC

2. (a) Principal office address of limited liability company: 3645 Muldoon Rd
☐ (Note: **MUST BE STREET ADDRESS**) Pensacola, FL 32526

(b) Mailing address of limited liability company:
☐ (Note: **MAY BE POST OFFICE BOX**) 3645 Muldoon Rd
Pensacola, FL 32526
LD 700000 2856

~~8005009~~ 1-1-05
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:

Valerie Walraven

Registered Office Address:

3645 Muldoon Rd
Pensacola, FL 32526

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

NEW Registered Agent:

Nicholas Dean Walraven

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

3645 Muldoon Rd
Pensacola, FL 32526

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.

Valerie Walraven
Signature of a member or authorized representative of a member

Valerie Walraven
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 the change.

Valerie Walraven
Signature of Registered Agent

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

FILED
09 SEP 22 10:00
SECRETARY OF STATE
TALLAHASSEE, FL