

L07000009461

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

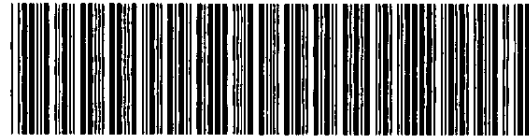
(Business Entity Name)

(Document Number)

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FILED
13 MAR -1 PM 12:13
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
MAR 5 - 2013



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 13, 2013

MCCALL MOODY LAW FIRM
DONNA V STEVENS
2940 KERRY FOREST PKWY, STE. 103
TALLAHASSEE, FL 32309

SUBJECT: ICON, LLC
Ref. Number: L07000009461

We have received your document for ICON, 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.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 913A00003590



McCall Moody Law Firm

February 7, 2013

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: ICON, LLC

To whom it concerns:

Please find enclosed a resignation and change of registration for the above Limited Liability Corporation and checks for the appropriate filing fees.

If you have any questions or concerns, please don't hesitate to contact our firm.

Sincerely,

Donna V. Stevens
Administrative Assistant McCall Moody Law Firm

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ICON 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:

Maggie McCall Moody
Name of Person

McCall Moody Law Firm
Firm/Company

2940 Kerry Forest Pkwy. Ste 103
Address

Tallahassee, FL 32309
City/State and Zip Code

mmoodye@mcCallmoodylaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maggie McCall Moody at (850) 656-7753
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

agreed to apply previous
\$87.50 payment ck. 2909
no additional amount of differential

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: Icon, LLC
2. (a) Principal office address of limited liability company: 3505 S. Monroe Street
(Note: **MUST BE STREET ADDRESS**) Tallahassee, FL 32301
- (b) Mailing address of limited liability company: 3505 S. Monroe Street
(Note: **MAY BE POST OFFICE BOX**) Tallahassee, FL 32301
- 1-25-2007 #L07000009461
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:

Registered Office Address:

(resigned -
filed 02-09-13)

~~Alleg~~ Ralph S. Stetzel Jr.
1535 Killbuck Center Blvd.
Tallahassee, FL 32301
Ste. C

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

NEW Registered Agent:

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

~~Maggie~~ Maggie McCall Moody Law Firm
2940 Kerry Forest Dr. W.
Ste. 103
Tallahassee, FL 32301
103

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]
Signature of a member or authorized representative of a member Jaquet MGR

Maggie McCall Moody
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]
Signature of Registered Agent

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

FILING FEE: \$25.00