10700020306

(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:
,
·

Office Use Only



300110457773

10/10/07--01042--001 **25.00

OT OCT 19 PM 4: 26

JВ

J. BRYAN OCT 1'1 2007

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: EXECUTIVE GOLF SCHOOL, 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:
Pamela Bove
(Name of Person)
c/o Hough & Company, P.A.
(Firm Company)
248 S. Nokomis Avenue
(Address)
Venice, FL 34284-1806
(City/State and Zip Code)
For further information concerning this matter, please call:
054.5050
Pamela Bove at (800) 651-5058 (Name of Person) (Area Code & Daytime Telephone Number)
(Ned code to Bayanto Perophore Namos)
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314
Tallahassee, Florida 32301
Enclosed is a check for the following amount:
\$25 Filing Fee & Certified Copy
INHS18 (8/05)

DIVISION OF CORPORATIONS

07 OCT 19 PM 4: 26



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 11, 2007

PAMELA BOVE C/O HOUGH & COMPANY, P.A. 248 S. NOKOMIS AVENUE VENICE, FL 34284-1806

SUBJECT: EXECUTIVE GOLF SCHOOL, LLC

Ref. Number: L07000020306

We have received your document for EXECUTIVE GOLF SCHOOL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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 . avs or

Letter Number: 607A00059835

ega no viva e la participa de la composition de la participa de la política de la participa de la participa de La responsación de la contraction de mesantida de la Fillety de la permitora inflació, planta a palítica de l La responsación de la contraction de mesantida de la Fillety de la política de la participa de la participa de

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: EXECUTIVE GOLF SCHOOL, LLC 2. The mailing address of the limited liability company is: 245 Rio Terra, Venice, FL 34285 L07000020306 02/22/2007 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Pamela M Bove Name 245 Rio Terra Address Venice, FL 34285 City, State and Zip 6. The name and address of the new registered agent and/or office: Mark Ring, attn: Hough & Company, P.A Name: 248 S. Nokomis Avenue Florida street address (P.O. Box NOT acceptable) 34284-1806 Venice. 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 of a member or authorized representative of a member) Pamela Bove (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 Aftereby confirm that the limited liability company has been notified in writing of this change.

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

l Registered Agent)