## LD700003359

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## COVER LEŤTEŔ

TO:

Amendment Section Division of Corporations

SUBJECT. 141 LA PASADA, L.L.C.

Name of Corporation

DOCUMENT NUMBER:

L07000025359

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

D. Randall Briley, Esq.

Name of Contact Person

Briley & Deal, LLC

Firm/Company

2215 South Third Street, Ste. 101

Address

Jacksonville Beach, FL 32250

City/State and Zip Code

rbriley@jaxrelaw.com

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

For further information concerning this matter, please call:

D. Randall Briley

,,904

285-5299

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



September 14, 2012

D. RANDALL BRILEY ESQ BRILEY & DEAL LLC 2215 SOUTH THIRD STREET, STE. 101 JACKSONVILLE, FL 32250

SUBJECT: 141 LA PASADA, L.L.C.

Ref. Number: L07000025359

We have received your document for 141 LA PASADA, L.L.C. and your check(s) totaling \$385.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. 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) 245-6051.

Letter Number: 312A00023249

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

## 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.

Name of the limited liability company:	141 LA PASADA, L.L.C.	
2. (a) Principal office address of limited liability company	y: 549 Granada Terrace	
(Note: MUST BE STREET ADDRESS)	Ponte Vedra Beach, FL 32082	
(b) Mailing address of limited liability company:	549 Granada Terrace	
(Note: MAY BE POST OFFICE BOX)	Ponte Vedra Beach, FL 32004	
3/07/07	L07000025359	
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:	D. Randall Briley, Esq.	
Registered Office Address:	135 Professional Drive, Ste. 101 Ponte Vedra Beach, FL 32082	
	Torre vedra Bedori, 1 E 02002	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent</u> :		
	0045 0 11 711 101 101 101	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2215 South Third Street, Ste. 101	
***************************************	Jacksonville Beach ,FL32250	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company  Signature of a member or authorized representative of a member  Steven Ritter  Printed or typed name of signee	lorida street address of the registered office ical. Or, in the case of a Plorida honited was/were authorized by an affirmative vote wise provided in the articles of or anization.	
I hereby accept the appointment as registered agent and a	gree 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 618, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby earlirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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