07000030044

(Re	questor's Name)	
(Ad	dress)	·
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

SEP 1 1 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				
	·				
SUBJ	ECT: Duckw	orth [)eve	elo	pment, LLC
	Name of I	imited	Liab	ilit	y Company
Dear S	Sir or Madam:				
The ea	nclosed Registered Agent/Registered C	Office C	hang	ge a	and fee(s) are submitted for filing.
Please	e return all correspondence concerning	this ma	itter t	o t	he following:
	G. Alan Howard				
	Name of Person				-
	Milam Howard Nicandri Dees & Gill Firm/Company	<u>am, P.</u>	<u>A.</u>		-
	r in in Company				
	14 East Bay Street				
	Address				-
	Jacksonville, Florida 32202	2			_
	City/State and Zip Code				
	ahoward@milamboward.co	m			
E	ahoward@milamhoward.col -mail address: (to be used for future annual report r	otification	n)		
For fu	orther information concerning this matt	er, plea	se ca	ıll:	
		•			
	G. Alan Howard	at (904	ļ	357-3660
	Name of Person	_		A	rea Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:		M	ΙΑΙ	LING ADDRESS:
	Registration Section				stration Section
	Division of Corporations				sion of Corporations Box 6327
	Clifton Building 2661 Executive Center Circle				shassee, Florida 32314
	Tallahassee, Florida 32301		1 2	ana	nassee, Plonda 32314
	Enclosed is a check for the following	ig amo	unt:		
	\$25 Filing Fee		<u></u>	\$55	Filing Fee & Certified Copy

\$TATEMENT 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:	Duckworth Development, LLC		
2. (a) Principal office address of limited liability compa	ny: 5726 Stuart Avenue		
(Note: MUST BE STREET ADDRESS)	Jacksonville, FL 32202		
(b) Mailing address of limited liability company:	5726 Stuart Avenue		
(Note: MAY BE POST OFFICE BOX)	Jacksonville, FL 32202		
3/20/2007	L07000030044		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:		
Registered Agent:	Rhonda S. Mowry		
Registered Office Address:	5211 NW 54th Ct		
3	Gainesville, FL 32254		
NEW Registered Agent: NEW Registered Office Address:	Mllam Howard Nicandri Dees & Gillam, P. A 14 East Bay Street		
(MUST BE FLORIDA STREET ADDRESS)	Jacksonville ,FL32202		
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as oth or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statues relative to the pand I am I a	e laws of the State of Florida, it is hereby Florida street address of the registered office Intical. Or, in the case of a Florida limited (s) was/were authorized by an affirm vive vote erwise provided in the articles of organization ny.		
Signature of Registaped Agent			

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