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	(Requestor's Name)	
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	(Business Entity Name)	
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## COVER LETTER

Division of Corporations
·
SUBJECT: Thompson's Auto Service, L.L.C.
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:
Larry H. Hipsh, III  Name of Person
Panie of Leison
Law Office of Daniel C. Perri Firm/Company
4 Eleventh Avenue, Suite 1
Address
Shalimar, Florida 32579
City/State and Zip Code
hipsh@perrilawoffice.com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for fulfure annual report notification)
For further information concerning this matter, please call:
Larry H. Hipsh, III at (_850)651-3011
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations  Division of Corporations
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 \$\infty\$ \$55 Filing Fee & Certified Copy

## 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: Tho	mpson's Auto Service	e, L.L.C.
2. (a) Principal office address of limited liability compan	ıy: <u>101 L</u> a	ang Road
(Note: MUST BE STREET ADDRESS)	Fort Walton Beach, Flo	rida 32547
(b) Mailing address of limited liability company:	101 Lang Road	
(Note: MAY BE POST OFFICE BOX)	Fort Walton Beach, Flo	rida 32547
3. Date of filing/registration in Florida	LOTOOOD 5	5700
		- 40
5. (a) Registered Agent and Registered Office shown on	the records of the Florida I	Dept. of State:
Registered Agent:	Jesse Benjamin Thomp	oson, Sr
Registered Office Address:	121 B Beach Drive Fort Walton Beach, Flo	rida 32547
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	Larry H. Hipsh, III  4 Eleventh Avenue, Suite 1	
(MUST BE FLORIDA STREET ADDRESS)	Shalimar	,FL32579
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 identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement 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  Larry H. Hipsh, III  Printed or typed name of signee  I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to me address. I hereby confirm that the limited liability company.	e laws of the State of Florida Florida street address of the ntical. Or, in the case of a F s) was/were authorized by a erwise provided in the articlay.	a, it is hereby registered office clorida limited an affirmative vote of organization
Signature of Registered Agent		

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