

LO7000080375

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

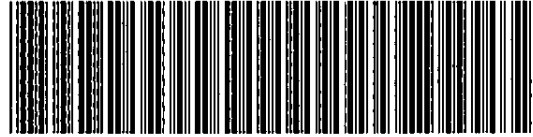
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100210092291

07/20/11--01015--010 \*\*25.00

FILED

2011 JUL 20 AM 11:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

JUL 21 2011

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** WILLOUGHBY GROUP-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:

HADID - MAHMOUD -  
(LAST) Name of Person (FIRST)

WILLOUGHBY GROUP-LLC  
Firm/Company

2578- SW. MANOR-HILL Drive  
Address

PALM CITY FL 34990-  
City/State and Zip Code

eastwest@aol.com (EASTWEST@aol.com)  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAHMOUD -  
HADID at (772) 221 1033-  
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

FILED  
2011 JUL 20 AM 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: WILLOW OAK BY GROUP LLC
2. (a) Principal office address of limited liability company: 2578 SW MANOR HILL DRIVE  
(Note: **MUST BE STREET ADDRESS**) PAUM CITY FL 34990
- (b) Mailing address of limited liability company: HADID MAHMOUD. A  
(Note: **MAY BE POST OFFICE BOX**) 2578 SW MANOR HILL DR  
PAUM CITY FL 34990  
LO7000080375
3. Date of filing/registration in Florida: 6/30/2011
4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
Registered Agent: DAVID NEHME.  
Registered Office Address: 19 SOUTH SELLERS PT RD  
STUART FL 34996
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
**NEW Registered Agent:** MAHMOUD. A. HADID  
**NEW Registered Office Address:** 2578 SW MANOR HILL DRIVE  
(**MUST BE FLORIDA STREET ADDRESS**) PAUM CITY FL 34990

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.

David Nehme  
Signature of a member or authorized representative of a member

DAVID NEHME  
Printed or typed name of signer

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.

David Nehme  
Signature of Registered Agent

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