L07000085299

(Requ	iestor's Name)			
(Addr	ess)	 		
(Addr	ess)			
(City/s	State/Zip/Phor	ne #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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2009 MAY -4 PM 4: 37
SECRETARY OF STATE
ANALYSEE FROM

C. LEWIS

MAY - 5.2009

EXAMINER

COVER LETTER

+

Division of Corporations		
SUBJECT: Eclipse Property Solution		
(Name of	f Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning to	his matter to the following:	
Polly Kersker Layton		
(Name of Person)		
Eclipse Property Solutions, LLC		
(Firm/Company)		
4056 Chall Jolo Blad M.E.		
1056 Snell Isle Blvd. N.E. (Address)		
St Petersburg, Florida 33704		
(City/State and Zip Code)	·	
For further information concerning this matter	r, please call:	
Polly K. Layton	at (727) 828-0847	
(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 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 32301	Tananassee, 1 fortaa 52514	
Enclosed is a check for the following	g amount:	
	☐ \$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. Na	me of the limited liability company: Eclipse Prop	perty Solutions	0	
2. (a)	Principal office address of limited liability company		+	
	(Note: MUST BE STREET ADDRESS)	St Petersburg, Fl. 33704	+	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1056 Snell Isle Blve. N.E. St Petersburg, Fl. 33704	0	
	t 21, 2007 te of filing/registration in Florida	<u>L07000085299</u> 4. Document number		
э. Da	te 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:	Nancy L. McConnell		
	Registered Office Address:	550 23rd Avenue N.		
	_	St Petersburg, Fl. 33704	=	
(b)	Enter name of NEW Registered Agent and/or NEV	W Registered Office address:		
	NEW Registered Agent:	Nany & Mc Cornell		
	NEW Registered Office Address:	700 7th Avenue N.		
	(MUST BE FLORIDA STREET ADDRESS)	Suite C St Petersburg FL 33701		
that at office hereby liabili	limited liability company is not organized under the lefter the change or changes are made, the Florida stree of the registered agent will be identical. Or, in the confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company.	t address of the registered office and the busin	ess	
(Signati	re of a member or authorized representative of a member)	_		
	Kersker Layton I or typed name of signee)	-		
I here comple am far F.S. (confir	by accept the appointment as registered agent and a with the provisions of all statutes relative to the provisions of the obligations of my position or, if this document is being filed to merely reflect a company has been notified.	gree to act in this capacity. I further agree to per and complete performance of my duties, as registered agent as provided for in Chapte change in the registered office address, I here in writing of this change.	and I r 608, by	
(Signat	ure of Registered Agent)	A CREEK		
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314				

INHS18 (05/08)