

L07000088/82

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J. BRYAN

SEP 17 2007

JB



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 17, 2007

MARTI TAYLOR
BARKER AND BARKER, P.A.
4244 ST. JOHNS AVENUE
JACKSONVILLE, FL 32210

SUBJECT: SUMMIT DEERWOOD, LLC
Ref. Number: L07000088182

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We have received your document for SUMMIT DEERWOOD, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 007A00054630

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUMMIT DEERWOOD, 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:

M. Taylor

(Name of Person)

BARKER AND BARKER P.A.

(Firm/Company)

4244 ST. JOHNS AVENUE

(Address)

JACKSONVILLE, FLORIDA 32210

(City/State and Zip Code)

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For further information concerning this matter, please call:

MARTI TAYLOR

(Name of Person)

at (

(904) 389-940

(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

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. The name of the limited liability company is: Summit Deerwood, LLC
2. The mailing address of the limited liability company is : 296 Edge of Woods Road
St. Augustine FL 32092

August 28, 2007

L070000088182

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Michael J. Barker

Name

296 Edge of Woods Road

Address

St. Augustine FL 32092

City, State and Zip

6. The name and address of the new registered agent and/or office:

Barker & Barker, P.A.

Name

4244 St. Johns Avenue

Florida street address (P.O. Box NOT acceptable)

Jacksonville FL 32210

City, State and Zip

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.

Sue Kowalewski
(Signature of a member or authorized representative of a member)

Sue Kowalewski

(Printed or typed name of signee)

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.

Michael J. Barker
(Signature of Registered Agent)

Michael J. Barker, its Registered Agent
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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