



Division of Corporations Public Access System

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REGISTERED AGENT CHANGE

FIELDSTONE-OLP, LLC

عدد کشاری از این	
Certificate of Status	0
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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.

Name of the limited liability company:	Fieldstone-OLP, LLC	,,	
2. (a) Principal office address of limited liability company	y:	9	<u> </u> <u>NIC</u>
(Note: MUST BE STREET ADDRESS)	3030 Hartley Road #350 Jacksonville, FL 32257	AUS	SION OF
(b) Mailing address of limited liability company:		∾	- 150 - 150
(Note: MAY BE POST OFFICE BOX)		AM 6:	
11/28/07	L07000118837	9	
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dopt. of	State:	
Registered Agent:	NEWTON, CLIFFORD B		
Registered Office Address:	C/O CLIFFORD B. NEWTON, 10192 SAN JOSE BLVD. JACKSONVILLE FL 32257 US		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>	•		
NEW Registered Agent:	F&L CORP.		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	One Independent Drive Suite 1300 Jacksonville ,FI	.3220	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company Signature of a member of authorized representative of a member	lorida street address of the register ical. Or, in the case of a Florida li was/were authorized by an affirm wise provided in the articles of ore	ed offi mited rative v	ice vote tion
Charles W. Arnold, III	-		
Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statules relative to the provision of all statules relative to the provision of all statules relative to the provision of and I am familiar with and accept the obligations of my poor Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company Signature of Registered Agent Authorized Synthy for F. Division of Corporations, P.O. Box 63:	FL Corp. 27, Tallahassee, FL 32314	jer agr my du ded foi red off s chan	ree to lies, r in Toe Tge.
FILING FEE: \$2	25.00		

INHS18 (05/08)