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(Requestor's Name)
(Address)
(Address)
(City/State/Žip/Phone #)
(Business Entity Name)
(Document Number)
ertified Copies Certificates of Status
Special Instructions to Filing Officer: Spoke to Christian, Karen part of the Company listed as KA. 10/15
OLLRASign
Office Use Only
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10/05/17--01030--016 **25.00

FILED 17 OCT 16 PH 2: 29 DATISION OF C. A.

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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 9, 2017

RHONDA POWELL 200 E NEW ENGLAND AVE STE 300 WINTER PARK, FL 32789

SUBJECT: SURREY HOMES, LLC Ref. Number: L08000046663

We have received your document for SURREY HOMES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 017A00020335

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COVER LETTER

TO: **Registration Section Division of Corporations**

Surrey Homes, LLC SUBJECT:

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:

Rhonda Powell

Name of Person

Swann Hadley Stump Dietrich & Spears

Firm/Company

200 E. New England Ave., Suite 300

Address

Winter Park, FL 32789

City/State and Zip Code

rpowell@swannhadley.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rhonda Powell	407 647-2777						
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	Enclosed is a check for the following amount:						
S25 Filing Fee	\$55 Filing Fee & Certified Copy						

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: Surrey Homes	, LLC				
		Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)	_ `		Mailing address of limited (Note: MAY BE POST	liability company;	
		558 W. New England Ave., Suite 240		558 W.	New England Ave., Suite 240		
		Winter Park, FL 32789		Winter Park, FL 32789			_
		05/09/2008		L080000	046663		
3.		Date of filing/registration in Florida	4.		Document number		
5	(a)						
	(4)	Registered Agent and Registered Office shown on the records of the	e Florid	a Dept. of Sta	ate:		
		Brown, Karen, Esq.					
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRES	<u>S)</u>		ن ب	
		200 East New England Avenue, Suite 300				1713	
		Winter Park	82789)		17 OCT 16 PI	
						0	'n
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> O		ldress:	_	PH 2:	Ū
						2 2	
		Swann Hadley Stump Dietrich & Spears, P.A				ಸ್ಕಳ	
		NEW Registered Office Address:					
		200 East New England Avenue, Suite 300					
		Winter Park	2789)	_		
the age was the	cha int w s/we artie	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cless of organization or the operating agreement of the li	te regi ility c the lir mited	istered offic ompany, it nited liabili liability co	ce and the business offi is hereby confirmed th ity company or as other impany.	ice of the regist at the change(s rwise provided	ered
	ienar	ure of a member or authorized representative of a member	\underline{C}	12227	Printed or typed name of	Stener	
							the
pro the to 1	visio obli nere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete po- gations of my position as registered agent as provided by reflect a change in the registered office address. The Vin writing of this change.	erforn for in reby c	confirm that chapter 60 confirm that	v duties, and I am Jamil 55, F.S. Or, if this docu t the limited liability co	liar with and ac unent is being f ompany has bee	ne cept iled n

111 *C*i in 71, ~~... Signature of Registered Agent

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