L08000049449

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(R	Requestor's Name)	
<u> </u>	ddress)	
(A	ddress)	
, _ (0	City/State/Zip/Phon	e #) ੍
PICK-UP	☐ WAIT	MAIL
(B	susiness Entity Nar	me)
(D	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	o Filing Officer:	
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J. BRYAN

DEC 19 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Premier Island Manage (Name	ement Group, L.L.C. e 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	g this matter to the following:	
Kelly G. Helmstetter / Corporate Paralegal		
(Name of Person)		
		8
Kevin M. Helmich, P.A.		月
(Firm/Company)		OB OEC 18 PM 1: 45
		OF CORPORATIONS
Post Office Box 5499 (Address)		= 93
(Addiess)		- 5
Destin, Florida 32540-5499		හා ර
(City/State and Zip Code)		
For further information concerning this ma	tter, please call:	
•		
Kelly G. Helmstetter	at (850) 650.4747	_
(Name of Person)	(Area Code & Daytime Telephone Number)	-
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301	•	
Enclosed is a check for the follow	ing 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. Name of the limited liability company: Premier	Island Management Group, L.L.C.
2. (a) Principal office address of limited liability com	manus 116 Country Club Drive
(Note: MUST BE STREET ADDRESS)	Niceville, Florida 32578
	14(COVIIIC), 7 ISHIGA 0251 G
(b) Mailing address of limited liability company:	44C County Chile Prins
(Note: MAY BE POST OFFICE BOX)	116 Country Club Drive Niceville, Florida 32578
	8
May 16, 2008	L08000049449
3. Date of filing/registration in Florida	4. Document number
	70 7
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:
Registered Agent:	William L. Ketchersid
•	Transaction of the second of t
Registered Office Address:	1241 Airport Road, Suite H
	Destin, Florida 32541
(b) Enter name of NEW Registered Agent and/or	NEW Degistered Office address:
(b) Enter hame of the W Registered Agent and/or	NEW Registered Office address.
NEW Registered Agent:	Kevin M. Helmich, Esquire
NEW Registered Office Address:	4481 Legendary Drive, Suite 200
(MUST BE FLORIDA STREET ADDRESS)	
	Destin
If the limited liability company is not organized under that after the change or changes are made, the Florida soffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the article limited liability company.	street address of the registered office and the business he case of a Florida limited liability company, it is get by an affirmative vote of the members of the limite
Michelle Garage	•
Signature of a member or authorized representation of a member)	
$AA \cup I \cap C$	is Member
(Printed or typed name of signee) Munagin	

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