

208 000054563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

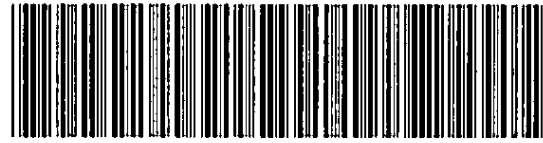
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800357908668

01/12/21--01011--005 **25.00

FILED
2021 JAN 12 AM 7:38
CLERK OF SUPERIOR COURT
MONTGOMERY COUNTY, MARYLAND

O SIMMONS
FEB 19 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lawrence B & Melissa S Davis 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:

Lawrence B Davis
Name of Person

Lawrence B & Melissa S Davis LLC
Firm/Company

PO Box 41662
Address

Santa Rosa Beach, FL 32459
City/State and Zip Code

Larry @ davis prop. com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Larry Davis at (850) 585-5420
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 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. Name of the limited liability company: Lawrence B + Melissa S Davis LLC

2. (a) 392 Canal Street (b) PO Box 41662
 Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) *(Note: MAY BE POST OFFICE BOX)*
Santa Rosa Beach, FL 32459 Santa Rosa Beach, FL 32459

3. 6/2/08 4. L08000054563
 Date of filing/registration in Florida Document number

5. (a) Kevin M Helmick RA
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

~~4405~~ 4405 Commons Drive East
 Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
Suite 102
Destin, FL 32541

(b) Marcus Huff
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

4405 Commons Drive East
NEW Registered Office Address:
Suite 102
Destin, FL 32541

2021 JAN 12 AM 7:38
 FILED

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.

Lawrence B Davis
 Signature of a member or authorized representative of a member

Lawrence B Davis Jr.
 Printed or typed name of signer

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 605, 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.

Marcus Huff
 Signature of Registered Agent