LÖ8000088378

(R	lequestor's Name)	
(A	ddress)	
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· (Č	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B	susiness Entity Name	e)
(D	Occument Number)	
Certified Copies	Certificates of	of Status

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COVER LETTER

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TO: Registration Section Division of Corporations		
Division of Corporations		
SUBJECT: Dunham Lake House, LLC		
(Name of L	imited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Charles R. Chilton		
(Name of Person)		
Sharit, Bunn & Chilton (Firm/Company)		
99 Sixth Street SW		
(Address)		
Winter Haven, FL 33880		
(City/State and Zip Code)		
For further information concerning this matter,	please call:	
Charles R. Chilton at	(863) 293-5000	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS:	
Division of Corporations	Registration Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following a	mount:	
☐ \$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: <u>Dunham L</u>	ake House, LLC
2. (a) Principal office address of limited liability compa (<u>Note: MUST BE STREET ADDRESS</u>)	ny: 99 Sixth Street SW Winter Haven, FL 33880
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	99 Sixth Street SW Winter Haven, FL 33880
September 16, 2008 3. Date of filing/registration in Florida	L08000088378 4. Document number
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:
Registered Agent:	Jones Foster Service, LLC
Registered Office Address:	505 South Flagler Drive, Suite 1100 West Palm Beach, Florida 33401
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:
NEW Registered Agent:	Charles R. Chilton
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	99 Sixth Street SW
	Winter Haven, FL 33880 ■ ,FL 33880
If the limited liability company is not organized under the that after the change or changes are made, the Florida stroffice 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 articles limited liability company.	eet address of the registered office and the business case of a Florida limited liability company, it is
(Signature of a member or authorized representative of a member)	
Charles R. Chilton (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my positions. Or, if this document is being filed to merely reflect confirm that the limited liability company has been notificated.	on as registered agent as provided for in Chapter 608, a change in the registered office address, I hereby ed in writing of this change.
(Signature of Registered Agent)	1 T T
Division of Corporations, P.O. Bo	Æ: \$25.00
INHS18 (05/08)	

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