

L08000089229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

2013 AUG 30 PM 2:38

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 17, 2013

DANA SCOTT
200 CLEARWATER LARGO RD NORTH
LARGO, FL 33770

SUBJECT: STUDIO 5542 LLC
Ref. Number: L08000089229

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for STUDIO 5542 LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 813A00017389

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Studio 5542, LLC DBA Peacocks
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:

Dana Scott Mgr
Name of Person

Studio 5542 LLC
Firm/Company

DBA, Peacocks

200 Clearwater Largo Rd. North
Address

Largo FL. 33770
City/State and Zip Code

ContactPeacocks@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dana L. Scott at (727) 400-4739
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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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.

1. Name of the limited liability company: Studio 5542^{LLC}
2. (a) Principal office address of limited liability company: 200 Clearwater Largo Rd. N
(Note: **MUST BE STREET ADDRESS**) Largo, FL 33770
- (b) Mailing address of limited liability company: 200 Clearwater Largo Rd. N.
(Note: **MAY BE POST OFFICE BOX**) Largo, FL 33770
3. Date of filing/registration in Florida: 9/19/2008
4. Document number: LO8000089229EI/EIN 26338808
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- Registered Agent: Doris G. McCormick
- Registered Office Address: 131 Shirley Dr.
Largo FL 33770
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
- NEW Registered Agent:** SB Debbie Rehn
- NEW Registered Office Address:** 1702 - 1702 Madrid Dr
(**MUST BE FLORIDA STREET ADDRESS**) Largo, FL 33778

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.

Dana L. Scott
Signature of a member or authorized representative of a member

Dana L. Scott
Printed or typed name of signee

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 608, 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.

Debbie Rehn
Signature of Registered Agent

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