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Special Instructions to Filing Officer:			





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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

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COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Division of Corporations Collier & Associates Real Estate, 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: Cary Collier Name of Person Collier & Associates Real Estate, LLC Firm/Company 1500 W. Platt St. Address Tampa, Florida 33606 City/State and Zip Code cary@carycollier.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Cary Collier 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 amount: □ \$55 Filing Fee & Certified Copy **△** \$25 Filing Fee

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: Collier & Ass	sociates Re	eal Estate, LLC
2. (a)	1500 W. Platt St. Tampa, FL 33606	(b) P.O. Box 320044 Tampa, FL 33679	
2. (")	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10/08/2008		08000095670
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Cary Collier Registered Agent and Registered Office shown on the records of	of the Florida Dep	pt, of State:
	Registered Office Address 234 E Davis Blvd	T ADDRESS)	
	Tampa	_{-L} 33606	15 JAN SECRE ALLAH
(b)	Cary Collier Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office addres	H 3: 5
	NEW Registered Office Address:		TE A
	1500 W. Platt St.		
	Tampa, ı	FL_33606	
the cha agent v was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the united of a member of a member authorized representative of a member by accept the appointment as registered agent and a lions of all statutes relative to the proper and completing agreement as provided by reflect a charge in the registered office address.	of the register liability comps of the limited he limited liab Cary (red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in bility company. Collier Printed or typed name of signee
notifie	regultons of my postion as registered agent as provided in the registered office address, din writing of this change. The of Registered Agent	I hereby confi	irm that the limited liability company has been