

LD8000106912

(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



500161420235

10/15/09--01021--019 \*\*25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 OCT 15 AM 10:36

FILED

T. CLINE

OCT 16 2009

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Bluewater Plumbing and Drains 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:

Douglas Mckissick  
Name of Person

Bluewater Plumbing and Drains LLC  
Firm/Company

1023 E Lloyd st  
Address

Pensacola FL 32503  
City/State and Zip Code

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

For further information concerning this matter, please call:

Douglas Mckissick at ( 850 ) 470-0065  
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

FILED  
2009 OCT 15 AM 10:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: Bluewater Plumbing and Drains LLC

2. (a) Principal office address of limited liability company: 1412 Stanford rd



(Note: **MUST BE STREET ADDRESS**)

Gulf Breeze FL 32563

(b) Mailing address of limited liability company:



(Note: **MAY BE POST OFFICE BOX**)

1412 Stanford RD

Gulf Breeze FL 32563

10/10/2009

3. Date of filing/registration in Florida

4. Document number

608 000 106912

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

Registered Agent:

Douglas Mckissick

Registered Office Address:

1412 Stanford RD

Gulfbreeze FL 32563

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**

**NEW** Registered Agent:

**NEW** Registered Office Address:

**(MUST BE FLORIDA STREET ADDRESS)**

1412 Stanford RD

Gulf Breeze, FL 32503

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.

Douglas Mckissick  
Signature of a member or authorized representative of a member

Douglas Mckissick

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 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.*

Douglas Mckissick  
Signature of Registered Agent

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

FILING FEE: \$25.00