## L0900000650

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B. BOSTICK
NOV 2 6 2013
EXAMINER

## **COVER LETTER**

TO: Registration Section - Division of Corporations			
SUBJECT: Turner & Costa, F	imited Liabil	ity Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered O	ffice Change	and fee(s) are submitte	d for filing.
Please return all correspondence concerning to	this matter to	the following:	
Scott A Turner Name of Person		_	
Turner & Costa, P.L.			
Firm/Company		_	2013 TALI
1180 Highway A1A			ZOI3 NOY 22
Address		_	
Satellite Beach, FL 329	37		ETTORIO
City/State and Zip Code		_	<b>三</b>
kturner@tmslawfirm.com		_	
E-mail address: (fo be used for future annual report no For further information concerning this matte			
Kim Turner	at ( 321	255-5501	
Name of Person		Area Code & Daytime Telepho	ne Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Divi P.O.	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, Florida 32314	
Enclosed is a check for the following	g 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 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: Turner & Cost	ia, P.L.	
2. (a) Principal office address of limited liability co	managar 1180 Hahway A1A	
(Note: MUST BE STREET ADDRESS)	Satellite Beach, FL 32937	
(NOTE: MOST BE STREET ADDRESS)		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	same	
November 20, 2013	L09000006580	
3. Date of filing/registration in Florida	4. Document number	<u> </u>
5. (a) Registered Agent and Registered Office show		
Registered Agent:	Scott A. Turner	<u>.                                    </u>
Paristand Office Address	440013 5 444	78 13 TAL
Registered Office Address:	1180 Highway A1A Satellite Beach, FL 32937	
	Satellite Beach, FL 32937	<del></del>
•		20 " 03
:		<u> </u>
(b) Enter name of <u>NEW Registered Agent</u> and/o	or NEW Registered Office	address:
NEW Desistand Assets		
NEW Registered Agent:	same	<del>- 3:</del>
NEW Registered Office Address:	1180 Highway A1A	<u> </u>
(MUST BE FLORIDA STREET ADDRESS		
IN COLUMN TO THE PROPERTY OF T	Satellite Beach	.FL 32937
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the chat the members of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability or	the Florida street address of e identical. Or, in the case of nge(s) was/were authorized therwise provided in the art	of the registered office of a Florida limited I by an affirmative vote of
Lori M. Costa		
Printed or typed name of signee	<del></del> _	
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address. Thereby confirm that the limited liability co	and agree to act in this cap the proper and complete pe my position as registered a to merely reflect a change many has been notified in	pacity. I further agree to rformance of my duties, gent as provided for in in the registered office writing of this change

Signature of Registered Agent

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