

LO9 000019906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

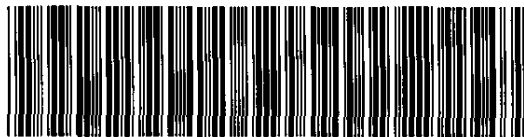
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700156378497

06/15/09--01046--025 \*\*25.00

2009 JUN 15 AM 11:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

T. CLINE  
JUN 16 2009  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Creek Cross Property, 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:

James O. Carey

Name of Person

Creek Cross Property, LLC

Firm/Company

1345 Turtle Dunes Court

Address

Ponte Vedra Beach, FL 32082-6507

City/State and Zip Code

jim.lou.carey@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James O. Carey, Registered Agent at ( 813 ) 417-0039

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

2009 JUN 15 AM 11:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**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: Creek Cross Property, LLC

2. (a) Principal office address of limited liability company: 1345 Turtle Dunes Court

☒ (Note: **MUST BE STREET ADDRESS**) Ponte Vedra Beach, FL 32082-6507  
USA

(b) Mailing address of limited liability company: 1345 Turtle Dunes Court

☒ (Note: **MAY BE POST OFFICE BOX**) Ponte Vedra Beach, FL 32082-6507  
USA

February 27, 2009

3. Date of filing/registration in Florida

L09000019906

4. Document number

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

Registered Agent: James O. Carey

Registered Office Address: 15848 Sanctuary Drive  
Tampa, FL 33647-1078  
USA

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

**NEW** Registered Agent: \_\_\_\_\_

**NEW** Registered Office Address: 1345 Turtle Dunes Court

**(MUST BE FLORIDA STREET ADDRESS)**

Ponte Vedra Beach, FL 32082-6507

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.

James O. Carey  
Signature of a member or authorized representative of a member

James O. Carey  
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.*

James O. Carey  
Signature of Registered Agent

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

FILING FEE: \$25.00