

L09000036399

(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:

A. LUNT
JAN 26 2011
EXAMINER

Office Use Only



200219070742

01/25/12--01010--029 **25.00

FILED
2012 JAN 25 PM 2:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CHILDERSLAW

— LLC —

Tel 866.996.6104
Fax 407.209.3870
www.smartbizlaw.com

Attorney at Law

2135 NW 40th Terrace, Suite B
Gainesville, Florida 32605

Jeff Childers
jchilders@smartbizlaw.com

Monday, January 23, 2012

VIA U.S. REGULAR MAIL

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

Re: ChildersLaw, LLC / L09000036399
New Registered Office Change

Dear Registration Section,

Please find enclosed the following for filing with the Division of Corporations:

Cover Letter;
Statement of Change of Registered Office; and
Check # 832 in the amount of \$25.00 for filing fee of the above.

Thank you for your time and assistance regarding this matter. Should you have any questions or if there is anything further we may provide to you, please do not hesitate to contact our office.

Respectfully,

Heather R. Sanders, FRP
Florida Registered Paralegal

/hrs
Enclosures as noted.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ChildersLaw, 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:

Seldon J. Childers

Name of Person

ChildersLaw, LLC

Firm/Company

2135 NW 40th Terrace, Suite B

Address

Gainesville, Florida 32605

City/State and Zip Code

jchilders@smartbizlaw.com / jchilders98@gmail.com

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

For further information concerning this matter, please call:

Heather R. Sanders

Name of Person

at (352)

562-6315 / 352-335-0400

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
2012 JAN 25 PM 2:38
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: ChildersLaw, LLC

2. (a) Principal office address of limited liability company: _____

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

2135 NW 40th Terrace, Suite B
Gainesville, Florida 32605

(b) Mailing address of limited liability company: _____

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

2135 NW 40th Terrace, Suite B
Gainesville, Florida 32605

April 15, 2009
3. Date of filing/registration in Florida

L09000036399
4. Document number

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

Registered Agent:

Seldon J. Childers

Registered Office Address:

1330 NW 6th Street
Suite C
Gainesville, FL 32601

(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)

2135 NW 40th Terrace
Suite B
Gainesville, FL 32605

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.

Seldon J. Childers
Signature of a member or authorized representative of a member

Seldon J. Childers

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.

Seldon J. Childers
Signature of Registered Agent

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

FILING FEE: \$25.00