## L09000063225

(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

DEC 24 2009

**EXAMINER** 

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2009 DEC 23 PH 1:51
SECRETARY OF STATE,
ALLAHASSEF FIRME.

FILED

## **COVER LETTER**

10.	Division of Corporations					
SUBJ	ECT: SHEENWATER	Homes, LLC				
Name of Limited Liability Company						
Dear	Sir or Madam:					
The e	nclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for	or filing.			
Please	return all correspondence concerning t	his matter to the following:				
	Ed Chandler			aller P.		
	Name of Person	<del> </del>	200 SE TAL			
	Sheenwaler Homes,	LLL	2009 DEC 23 SECRETARY ALLAHASSE	FILE		
	Firm/Company		£77			
	404 Barre Farie L	ane	PH 1:5	ED		
	Address	;	76 3			
Fort Walton Beach, 72 32547						
	City/State and Zip Code					
ed chandler 50@gmail.com						
E	-mail address: (to be used for future annual report no					
For fi	orther information concerning this matte	r, please call:				
	Ed Chandler	at (150) 243-8086				
	Name of Person	Area Code & Daytime Telephone	lumber			
	STREET/COURIER ADDRESS:	MAILING ADDRESS:				
	Registration Section Division of Corporations	Registration Section 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	g amount:				
	\$25 Filing Fee	\$55 Filing Fee & Certified C	ору			

## 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: SHEEN W.	ATER HOMES, LLC
2. (a) Principal office address of limited liability company:	Ed Chondler Sheen water Homes LLC
(Note: MUST BE STREET ADDRESS)	404 Barataria Lane Fort Walton Break 74 3254
(b) Mailing address of limited liability company:	(same) Pos &
(Note: MAY BE POST OFFICE BOX)	
6/29/2009	50015722 5875 m
	1. Document number
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Lepth of State:
Registered Agent:	D. Michael Chessor, Esquire
Registered Office Address:	1201 Salim PKWY Shaliman, 72 32579
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent</u> :	Comeron Surpson
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	152 EGLIN PARKINAL, N.E.
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identi liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company.	aws of the State of Florida, it is hereby orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
Signature of a member or authorized representative of a member	-
Edward Chandler	_
Printed or typed name of signee	_
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the pro- and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.

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

Signature of Registered Agent