109000079419

(F	Requestor's Name)				
	Address)				
(<i>F</i>	Address)				
(0	City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL			
(E	Business Entity Name)				
(Document Number)					
. Certified Copies	Certificates of S	itatus			
Special Instructions t	o Filing Officer:				
L	Office Use Only				



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D. SCOTT AUG 1 4 2017

COVER LETTER

Division of Corporations			
Legal Collection Services, LL SUBJECT:	.C		
	of Limited L	iability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offic	ce Change and	I fee(s) are submitted for filing	<u>.</u>
Please return all correspondence concerning this	s matter to the	following:	
Richelle Harrelson			المس
Name of Person			
Legal Collection Services, LLC			部島コロ
Firm/Company		_	
8333 N Davis Hwy			# 9 to
Address			東京 も
Pensacola, FL 32514			
City/State and Zip Code			
kristie.titze@medmgtservices.com			
E-mail address: (to be used for future annu	ual report noti	fication)	
For further information concerning this matter.	please call:	- ·	
Richelle Harrelson	850	474-8664	
Name of Person		Area Code & Daytime Tele	ephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 illahassee, Florida 32314	
Enclosed is a check for the following	amount:		
☑ \$25 Filing Fee	□ s	55 Filing Fee & Certified Cop	oķ.

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	ame of the limited liability company: Legal Collection	on Se	rvices, LL	C	
2. (a)	8333 N Davis Hwy		(b) 8333 N Davis Hwy		
Σ. (Δ)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	 `	<u> </u>	Meiling address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Pensacola, FL 32514	_	Pensac	ola, FL 32514	
	08/14/2009	_	L090000	79419	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Gary W Huston			<u>. </u>	
	Registered Agent and Registered Office shown on the records of t 125 W Romana Street	he Flori	da Dept. of St	ite:	
	Registered Office Address (MUST BE FLORIDA STREET A Suite 800	IDDRE.			
	Pensacola .FL	3250	2		
(b)	Jeremy C Branning Enter name of NEW Registered Agent and/or NEW Registered	Office	ddress:	= E8 =	
٠	125 W Romana Street			- 第二	
	NEW Registered Office Address:				
	Suite 800			- 23 = 0	
·	Pensacola	3250	1	· · · · · · · · · · · · · · · · · · ·	
the charge agent was/we the art	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of letes of organization or the operating agreement of the limit of a member or authorized representative of a member by accept the appointment as registered agent and agricohs of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I had in weither of the share.	the reg bility of f the li limited Ri	istered offic company, it mited liabil: liability co chelle Har	ce and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany. Telson Printed or typed name of signee	
to mer natifica	ely reflect a change in the registered office address, I had in writing of this change.	ereby 	conflrin tha	The limited liability company has been	
Signatu	re of Registered Agent				
	Division of Corporations • P.O. H			issee, FL 32314	

INH\$18 (2/14)