

C09000 087708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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13 AUG 22 PM 2:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

600250067136



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 7, 2013

JOHN C MCGEE  
5 CALHOUN AVE UNIT 702  
DESTIN, FL 32541

SUBJECT: VIS MAJOR LLC  
Ref. Number: W13000044043

We have received your document for VIS MAJOR LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 113A00018914

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Vis Major, LLC  
(Name of Alien Business Organization)

Dear Sir or Madam:

The enclosed Statement of Change of Registered Agent/Registered Office for Alien Business Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John C. McGee  
(Name of Person)

Vis Major, LLC  
(Firm/Company)

5 Calhoun Avenue, Unit 702  
(Address)

Destin, Florida 32541  
(City/State and Zip Code)

For further information concerning this matter, please call:

John C. McGee at ( 850 ) 244.5151  
(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:**

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certified Copy

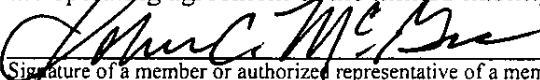
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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*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.*

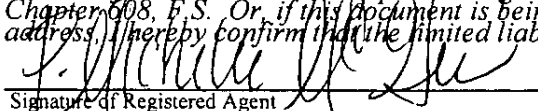
1. Name of the limited liability company: Vis Major, LLC
2. (a) Principal office address of limited liability company: 5 Calhoun Avenue, Unit 702  
Destin, Florida 32541  
**(Note: MUST BE STREET ADDRESS)**
- (b) Mailing address of limited liability company: 5 Calhoun Avenue, Unit 702  
Destin, Florida 32541  
**(Note: MAY BE POST OFFICE BOX)**
- 09/10/2009 3. Date of filing/registration in Florida L09000087708 4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- Registered Agent: James W. Grimsley
- Registered Office Address: 909 Mar Walt Drive, #1014  
Fort Walton Beach, Florida 32547
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
- NEW Registered Agent:** Pamela Michelle McGee
- NEW Registered Office Address:** 1283 N. Eglin Parkway  
**(MUST BE FLORIDA STREET ADDRESS)** Shalimar, Florida 32579

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.

  
Signature of a member or authorized representative of a member

John C. McGee  
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.*

  
Signature of Registered Agent

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