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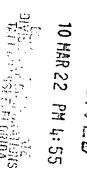
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EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK 'AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 **CONTACT: KATIE WONSCH** DATE: 03/22/2010 **REF. #:** RA3638.121742 CORP. NAME: PARC EMERALD COAST, LLC () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () ARTICLES OF DISSOLUTION () ANNUAL REPORT () TRADEMARK/SERVICE MARK () FICTITIOUS NAME () FOREIGN QUALIFICATION () LIMITED PARTNERSHIP () LIMITED LIABILITY () REINSTATEMENT () MERGER () WITHDRAWAL () CERTIFICATE OF CANCELLATION (XX) OTHER: CHANGE OF AGENT STATE FEES PREPAID WITH CHECK# 534192 FOR \$ 25.00 AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED: COST LIMIT: \$_____ PLEASE RETURN:

(XX) PLAIN STAMPED COPY

() CERTIFICATE OF STATUS

() CERTIFIED COPY () CERTIFICATE OF GOOD STANDING

Examiner's Initials

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.

Name of the limited liability company:	RC EMERALD COAST, LLC	
2. (a) Principal office address of limited liability compar	: 7892 BAYMEADOWS WAY	
(Note: MUST BE STREET ADDRESS)	JACKSONVILLE, FL 32256	
(b) Mailing address of limited liability company:	7892 BAYMEADOWS WAY	
(Note: MAY BE POST OFFICE BOX)	JACKSONVILLE, FL 32256	
09/17/2009	L09000089899	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	CORPORATION SERVICE COMPANY	
Registered Office Address:	1201 HAYS STREET TALLAHASSEE FL 32301-2525	
NEW Registered Agent: NEW Registered Office Address:	CORPDIRECT AGENTS, INC. 515 E. PARK AVENUE	
<u>NEW</u> Registered Office Address; (MUST BE FLORIDA STREET ADDRESS)		
	TALLAHASSEE ,FL32301	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be ider liability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization	
Chief Administrative as	nd Legal Office	
Gwen Hutcheson Griggs Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my pand in the control of the co	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office ny has been notified in writing of this change.	

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