L09000/06273

(Requestor's Name)								
(Address)								
(Address)								
(Cit	y/State/Zip/Phone	e #)						
PICK-UP	☐ WAIT	MAIL						
(Business Entity Name)								
(Document Number)								
Certified Copies	_ Certificates	of Status						
Special Instructions to Filing Officer:								

Office Use Only



900271436939

04/08/15--01004--016 **25.00

SECRETARY OF STATE
TALLAHASSEE FLORID
TALLAHASSEE FLORID

DC5/6

COVER LETTER

TO: Registration Section Division of Corporations								
SUBJECT: Centennial Holdings (Mid-Flo	Centennial Holdings (Mid-Florida), 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:								
Frank D. Gonzalez, Esq.								
Name of Person								
The Children's Home Society of Florida								
Firm/Company								
1485 S. Semoran Blvd., Ste. 1448								
Address								
Winter Park, FL 32792								
City/State and Zip Code								
frank.gonzalez@chsfl.org								
E-mail address: (to be used for future annu	al report notification)							
For further information concerning this matter, p	please call:							
Frank D. Gonzalez, Esq.	at ()							
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 a	mount:							
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy							

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.	Na	me of the limited liability company: Centennial	Hold	lings	(I	Mid-Flor	rida), LLC				
2. (a)	Centennial Holdings (Mid-Florida), LLC		(1	b) _	Centen	nial Holdings	s (Mid-	Florid	a), LLC	
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(٠, .		Mailing address o (Note: MAY B		-		
		1485 S. Semoran Blvd., Ste. 1448				1485 S.	Semoran B	lvd., St	te. 144	18	
		Winter Park, FL 32792			1	Winter F	Park, FL 327	'92		·	
		November 9, 2009			L	090001	08293	,			
3.		Date of filing/registration in Florida		4.	_		Document nu	ımber			
5. ((a)	David A. Bundy									
J. 1	(4)	Registered Agent and Registered Office shown on the records of	fthe	Florid	a D	ept. of Stat	e:				
		The Children's Home Society of Florida									
		Registered Office Address (MUST BE FLORIDA STREET	ADI	DRES	<u>S)</u>		_				
		1485 S. Semoran Blvd., Ste. 1448									
		Winter Park , F	L_32	2792			-		15	SEC	
(h	b)	Frank D. Gonzalez, Esq.							APR -	AHAMA AHAMA	
	- /	Enter name of NEW Registered Agent and/or NEW Registere	d Of	ice ad	ldr	ess:	_		8		
		The Children's Home Society of Florida							AH 9:		
		NEW Registered Office Address:					-		22	PATE TO THE TO THE PATE TO THE PATE TO THE PATE TO THE TO THE TO THE TOTAL THE PATE TO THE TO THE TO THE TOTAL TO THE TOTAL TO THE TOTAL T	
		1485 S. Semoran Blvd., Ste. 1448					-	¥			
		Winter Park, F	L 32	792			-				
the dager was	chai it w /we	mited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited by an affirmative vote of the members cles of organization or the operating agreement of the	of the liabil of th	regi lity cone line lited	ste om nite lia	ered office pany, it i ed liabilit bility con	e and the busir s hereby confir y company or npany.	ness offi rmed tha	ce of that the c	ne registered hange(s)	
	\rightarrow	My Mu		MIC	cha	ael J. Sl	Printed or typed	I name of	cinnee		
I he prov the o	reb visio obli vere	ure bita member or authorized representative of a member by accept the appointment as registered agent and as ons of all statutes relative to the proper and complet gations of my position as registered agent as provid by reflect a change in the registered office address, it is writing of this change.	gree e pei ed fo her	to ac rform or in (eby c	t in an Ch on	this cap ice of my apter 605 firm that	agity I furtha	r aaraa	to com	oly with the and accept being filed has been	
Sign	atti	e of Registered Agent									
		Division of Corporations P.O. FILING					ssec, FL 32314	4			

INIIS18 (2/14)