

L10000024364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

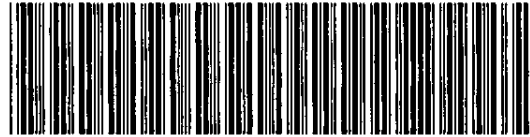
(Business Entity Name)

(Document Number)

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2013 AUG 16 PM 12:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Guffigan AUG 19 2013

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Boguess Family Properties 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:

Anthony Boguess

Name of Person

Boguess Family Properties LLC.

Firm/Company

470 Turkey Creek

Address

Alachua, FL 32615

City/State and Zip Code

boguess1@windstream.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anthony Boguess

Name of Person

at ( 352 ) 356-0259

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:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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: Boggess Family Properties LLC.

2. (a) Principal office address of limited liability company: 7403 NW 117th Lane  
Alachua, FL 32615  
**(Note: MUST BE STREET ADDRESS)**

(b) Mailing address of limited liability company: 470 Turkey Creek  
Alachua, FL 32615  
**(Note: MAY BE POST OFFICE BOX)**

3/3/2010

3. Date of filing/registration in Florida

L10000024369

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Anthony Boggess

Registered Office Address:

148 NE Pickeral Rd  
Mayo, FL 32066

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address:**

**NEW** Registered Agent:

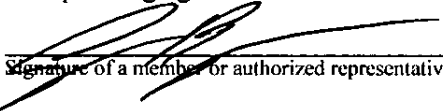
**NEW** Registered Office Address:

**(MUST BE FLORIDA STREET ADDRESS)**

7403 NW 117th Lane

Alachua, FL 32615

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

Anthony Boggess

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

FILED  
2010 AUG 16 PM 12:09  
SECRETARY OF STATE  
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