L10000036956

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LLC RO Charge

JUL 0 3 2014 T. CARTER

COVER LETTER

TO:

Registration Section

Divi	sion of Corporations					
SUBJECT:	R & J TAYLOR ENTERPRISES, LLC					
	Name of Limited Liability Company					
Dear Sir or N	Madam:					
The enclosed	d Registered Agent/Registered Offi	ce Change an	d fee(s) are submitted for filing.			
Please return	all correspondence concerning thi	s matter to the	e following:			
Brandon D). Beardsley					
	Name of Person					
Mowrey, S	Shoemaker & Beardsley, P.L.					
	Firm/Company	······································				
2801 N. T	hird Street					
	Address					
St. August	tine, FL 32084					
	City/State and Zip Code					
bbeardsle	y@ancientcitylaw.com					
E-mail	address: (to be used for future ann	ual report noti	fication)			
For further in	nformation concerning this matter,	please call:				
Brandon D). Beardsley	904	824-5711			
	Name of Person	ar (Area Code & Daytime Telephone Number			
Regi Divis Clift 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle shassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:						
2 \$2	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	ane of the finited hability company:			ERPRISES, LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 114 Grafft Ln.	((b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 114 Grafft Ln.
	St. Augustine, FL 32084			St. Augustine, FL 32084
2	April 5th, 2010		L	L10000036956
3.	Date of filing/registration in Florida Brandon D. Beardsley	4.		Document number
5. (a)	Registered Agent and Registered Office shown on the records of	f the Florid	da I	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	SS)	!
	2825 Lewis Speedway, Suite 107			
	St. Augustine	_32084	4	l
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	ıdd	ALL TO PILED PILES:
	NEW Registered Office Address:			2: 45
	2801 N. Third Street			5 NEW
	St. Augustine , F	L_32084	4	
signal I herei provisi the oblito mere notified	imited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited is the earthorized by an affirmative vote of the members clee of organization or the operating agreement of the une of a member or authorized representative of a member by accept the appointment as registered agent and as one of all statutes relative to the proper and completing accept the appointment as registered agent as providely reflect a change in the registered office address. If in writing of this change	of the reg liability of of the line e limited	gist cor mi I li	tered office and the business office of the registered mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in liability company. Printed or typed name of signee

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