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## **COVER LETTER**

TO:

INHS18 (2/14)

Registration Section

**Division of Corporations** AA INVESTMENTS PANAMA CITY LLC **SUBJECT:** 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: SHIRLEY R. JONES (SOLE MEMBER) Name of Person AA INVESTMENTS PANAMA CITY LLC Firm/Company 7833 MCELVEY RD Address PANAMA CITY BEACH, FL 32408 City/State and Zip Code s1jones@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JAMES C. TAYLOR, CPA 850 236-8677 Area Code & Daytime Telephone Number Name of Person **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: ■ \$55 Filing Fee & Certified Copy □ \$25 Filing Fee

## 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 symmits, the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	AA INVESTI	MENTS P	ANAMA	CITY LLC
		(b)		Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)
	7833 MCELVEY RD		7833 M	ICELVEY RD
	PANAMA CITY BEACH, FL 32408		PANAM	MA CITY BEACH, FL 32408
	06/29/2010	L	.100000	068878
3.	Date of filing/registration in Florida	4.		Document number
5 (a)	<u> </u>			
5. (a)	Registered Agent and Registered Office shown on the records of JONES, AARON MICHAEL	of the Florida I	Dept. of Stat	ate:
	Registered Office Address <i>MUST BE FLORIDA STREET</i> 7833 MCELVEY RD	T ADDRESS)		
	PANAMA CITY BEACH	32408 FL	,	2016 2016 1
(L)	,			AHASS I
(b)	Enter name of NEW Registered Agent and/or NEW Registered		ress:	
	JONES, SHIRLEY R.			25 S
	NEW Registered Office Address:			- 26
	7833 MCELVEY RD			
	PANAMA CITY BEACH	32408		_
the cha agent v was/w	limited 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 ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regist liability con s of the limit	ered officen pany, it ted liabilit ability con	ce and the business office of the registere is hereby confirmed that the change(s) ity company or as otherwise provided in impany.
	Shy		5/	Printed or typed name of signce
-	nture of a member or authorized representative of a member			-
provis the ob to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provide ely reflect a change in the registered office address, d inwriting of this change.	igree to act i te performa ded for in Ci I hereby coi	n this cap nce of my hapter 60 nfirm thai	pacity. I further agree to comply with the values, and I am familiar with and accepts, F.S. Or, if this document is being filed the limited liability company has been
Signati	ire of Registered Agent			

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