

L10000073027

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000209577 3)))



H130002095773ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

FILED
13 SEP 20 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

13 SEP 20 PM 12:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.*

Email Address: _____

**LLC REGISTERED AGENT CHANGE
29 NORTH INVESTORS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

9-23-13
J

Pro

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 29 North Investors, 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:

Ronnie Culbreth

Name of Person

Victory Real Estate Investments, LLC

Firm/Company

240 Brookstone Centre Parkway

Address

Columbus, GA 31904

City/State and Zip Code

706-327-4774

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

For further information concerning this matter, please call:

Ronnie Culbreth
Name of Person

at (706) 327-4774
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

INHS18 (5/08)

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: 29 North Investors, LLC
2. (a) Principal office address of limited liability company: 240 Brookstone Centre Parkway
Columbus, GA 31904
(Note: MUST BE STREET ADDRESS)
- (b) Mailing address of limited liability company: 240 Brookstone Centre Parkway
Columbus, GA 31904
(Note: MAY BE POST OFFICE BOX)
- 07/12/2010 L10000073027
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:	<u>Your Capital Connection, Inc.</u>
Registered Office Address:	<u>417 E. Virginia Street</u> <u>Suite 1</u> <u>Tallahassee, FL 32301-1283</u>
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

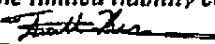
<u>NEW Registered Agent:</u>	<u>C T Corporation System</u>
<u>NEW Registered Office Address:</u>	<u>1200 South Pine Island Road</u>
<u>(MUST BE FLORIDA STREET ADDRESS)</u>	<u>Plantation, FL 33324</u>

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

M. Ronald Culbreth
 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.

By: C T Corporation System  Beth Korman, Asst. Secretary
 Signature of Registered Agent

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

INHS18 (05/08)