

Division of Corporations

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# L10000091316

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H10000243223 3)))



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To:

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

From:

Account Name : DAVID E HIGHTOWER  
Account Number : I20060000090  
Phone : (850) 549-3812  
Fax Number : (850) 607-2663

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

2010 NOV - 8 AM 9:22

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

Email Address: Shannon@htowerlaw.com

RECEIVED  
10 NOV - 8 PM 4:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT CHANGE  
LAMARK INVESTMENTS, LLC**

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

**T. CLINE**  
NOV - 9 2010  
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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LaMark Investments, 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:

David E. Hightower

Name of Person

Hightower Law Firm

Firm/Company

1514 Norht 9th Avenue

Address

Pensacola, Florida 32503

City/State and Zip Code

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

For further information concerning this matter, please call:

David Hightower or Shannon Reynolds at ( 850 ) 549-3812

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 amount:**

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

IN11S18 (5/08)

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TALLAHASSEE FLORIDA

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**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: LaMark Investments, LLC

2. (a) Principal office address of limited liability company: \_\_\_\_\_



(Note: **MUST BE STREET ADDRESS**)

48 Country Club Road  
Shalimar, Florida 32579

(b) Mailing address of limited liability company: \_\_\_\_\_



(Note: **MAY BE POST OFFICE BOX**)

48 Country Club Road  
Shalimar, Florida 32579

8/30/2010

3. Date of filing/registration in Florida

L10000091316

4. Document number

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

Registered Agent:

Brian S. Pennington

Registered Office Address:

48 Country Club Road  
Shalimar, Florida 32579

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

**NEW** Registered Agent:

Kimberly S. Pennington

**NEW** Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

48 Country Club Road  
Shalimar, FL 32579

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.

Kimberly S. Pennington  
Signature of a member or authorized representative of a member

Kimberly S. Pennington

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.

Kimberly S. Pennington  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)

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