

L10000092711

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

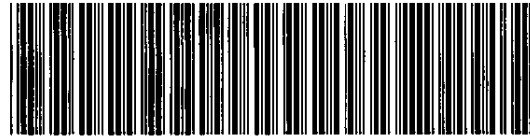
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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T. CLINE

OCT 15 2010

EXAMINED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 OCT 14 AM 11:21

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 28, 2010

CARYN MOUTREY
1420 CELEBRATION BLVD., STE. 300
CELEBRATION, FL 34747

SUBJECT: ONERES INTERNATIONAL, LLC
Ref. Number: L10000092711

We have received your document for ONERES INTERNATIONAL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 410A0002297

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OneRes International Realty, 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:

Caryn Moutrey

Name of Person

OneRes International Realty, LLC

Firm/Company

1420 Celebration Blvd., Ste 300

Address

Celebration, FL 34747

City/State and Zip Code

edieawaddell@yahoo.com

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

For further information concerning this matter, please call:

Marnie Vaughn

Name of Person

at (407)

257-8948

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: OneRes International Realty, LLC

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



(Note: MUST BE STREET ADDRESS)

1420 Celebration Blvd., Suite 300
Celebration, FL 34747

(b) Mailing address of limited liability company: _____



(Note: MAY BE POST OFFICE BOX)

09/03/2010

L10000092711

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:

Michael Borders

Registered Office Address:

1420 Celebration Blvd.
Suite 300
Celebration, FL 34747

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

NEW Registered Agent:

Florida Specialty Homes, LLC

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

1420 Celebration Blvd.
Ste. 300
Celebration, FL 34747

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.

Edith A. Waddell

Signature of a member or authorized representative of a member

Edith A. Waddell

Printed or typed name of signer

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.

Edith A. Waddell

Signature of Registered Agent

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

FILING FEE: \$25.00