

L100000098068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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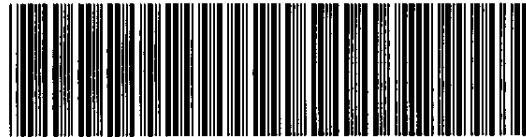
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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J. SAULSBERRY
EXAMINER

JUN 28 2011

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SOUTHERN EXPOSURE PLAZA 1, LLC
Name of Corporation

DOCUMENT NUMBER: L10000098068

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LUANN RUSE
Name of Contact Person

SOUTHERN EXPOSURE PLAZA 1, LLC
Firm/Company

465 BAYFRONT PLACE
Address

NAPLES, FL 34102-6454
City/State and Zip Code

lulunaplesfl@aol.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

JUDITH A. BICE at (239) 598-2069
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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: SOUTHERN EXPOSURE PLAZA 1, LLC

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

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

465 BAYFRONT PLACE
NAPLES, FL 34102-6454

(b) Mailing address of limited liability company:

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

(SAME)

09/20/2010

3. Date of filing/registration in Florida

L10000098068

4. Document number

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

Registered Agent:

CORPORATION SERVICE Co.

Registered Office Address:

1201 HAYS STREET
TALLAHASSEE, FL 32301

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

NEW Registered Agent:

KEVIN L. STONEBURNER

NEW Registered Office Address:

465 BAYFRONT PLACE

(**MUST BE FLORIDA STREET ADDRESS**)

NAPLES, FL 34102

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

JUDITH A. BICE

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity and 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.

Signature of Registered Agent

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

FILING FEE: \$25.00