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COVER LETTER

TO: Registration Section **Division of Corporations** Joseph's Pharmacy 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: John Pharr Jr. Name of Person John Pharr CPA LLC Firm/Company 3014 E Cervantes Street Address Pensacola, Florida 32503 City/State and Zip Code john@pharrcpa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: John Pharr Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314

□ \$55 Filing Fee & Certified Copy

Tallahassee, Florida 32301

■ \$25 Filing Fee

Enclosed is a check for the following amount:

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: Joseph's pharmacy LLC				
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	3130 N. Pace Blvd Pensacola. Florida 32505			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	3130 N. Pace Blvd Pensacola, Florida 32505			
10/12/2011	L10000105510			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown on the Registered Agent:	he records of the Florida United States Corporation Agents, Inc.	_	f State:	
Registered Office Address:	13302 Winding Oaks Blvd		F23	
	Suite A Tampa, Florida 33612	3	<u> </u>	
	, d., p. q. , 10		oli,	*****
(b) Enter name of NEW Registered Agent and/or NEV	V Registered Office add	lress:	警 - 6	1 mm 2
NEW Registered Agent:	John T Pnarr Jr.	ŢT.	76)	further to to
NEW Registered Office Address:	3014 E Cervantes Street		ည် ≕	· · · · · ·
(MUST BE FLORIDA STREET ADDRESS)	Pensacola, Florida 32503		7 32503	
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Fland the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	orida street address of the	e registe Florida	ered offi	
Printed or typed name of signee I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the provisions of all statutes relative to the provisions of and I am familiar with and accept the obligations of my post Chapter 608, FS. Or, if this document is being filed to men address. I hereby confirm that the limited liability company	gree to act in this capaci per and complete perfor sition as registered agen ely reflect a change in th has been notified in wri	ty. I fur mance of as pro- ie regis ting of t	ther ag of my di vided fo tered of his cha	ree to ities, ir in fice nge.
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Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

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