

# L100006315

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12 OCT 31 PM 4:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK

NOV - 1 2012

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** EAGLES ONE PROPERTY SERVICES 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:

MARY ANN BENSON

Name of Person

EAGLES ONE PROPERTY SERVICES LLC

Firm/Company

9722 LAKE DR

Address

NEW PORT RICHEY FL 34654

City/State and Zip Code

maryann\_benson2007@yahoo.com

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

For further information concerning this matter, please call:

MARY ANN BENSON

Name of Person

at ( 803 )

341 8114

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: EAGLES ONE PROPERTY SERVICES LLC

2. (a) Principal office address of limited liability company: 9722 LAKE DR

**(Note: MUST BE STREET ADDRESS)** NEW PORT RICHEY FL 34654

(b) Mailing address of limited liability company: 9722 LAKE DR

**(Note: MAY BE POST OFFICE BOX)** NEW PORT RICHEY FL 34654

OCT 18 2012

L10000106315

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: KENNETH W BENSON

Registered Office Address: 9722 LAKE DR  
NEW PORT RICHEY FL 34654


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

**NEW** Registered Agent: MARY ANN E. BENSON

**NEW** Registered Office Address: 9722 Lake Dr  
**(MUST BE FLORIDA STREET ADDRESS)** New Port Richey FL 34654

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TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE

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

KENNETH W BENSON  
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.*

  
Signature of Registered Agent

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 23, 2012

MARY ANN BENSON  
EAGLES ON PROPERTY SERVICES LLC  
9722 LAKE DRIVE  
NEW PORT RICHEY, FL 34654

SUBJECT: EAGLES ONE PROPERTY SERVICES LLC  
Ref. Number: L10000106315

We have received your document for EAGLES ONE PROPERTY SERVICES 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 must sign accepting the designation.

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) 245-6051.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 912A00026017