L10000116238

(Requestor's Name)
(Address)
(Address)
(
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Document Number)
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2011 DEC 19 PM 3: 58

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DEC 2 0 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 23, 2011

GARY JOHNS C/O BEACH COMMUNITY BANK 17 SE EGLIN PARKWAY FT WALTON BEACH, FL 32548

SUBJECT: SUPERIOR STORAGE OF PENSACOLA, LLC

Ref. Number: L10000116238

FILED PH 3: 59
RECRETARY OF STATES

We have received your document for SUPERIOR STORAGE OF PENSACOLA, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 211A00026481



P.O. Box 4400 Fort Walton Beach, FL 32549

December 16, 2011-

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re:

Superior Storage of Pensacola, LLC

Your Reference Number: L10000116238

Dear Sir or Madam:

Thank you for your correspondence of November 15, 2011 regarding the above-referenced matter. As per your correspondence, we have completed the proper forms and are enclosing the same herewith for filing with the Division of Corporations.

Also enclosed, per your instructions, is a copy of your November 15, 2011 correspondence.

Thank you for your assistance and cooperation. In the event you have any questions, please do not hesitate to contact me.

Sincerely,

Sonya I. Mart, Assistant
Special Assets Department

sonyah@beachcommunitybank.com

/slh

Enclosures

Main Office

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Superior Storage of Pensacola, LLC Name of Limited Biability 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:		
Sasha L. Eastburn Name of Person Beach Community Bunk Firm/Company 17 SE. Eglin Parkway		
Address		
Fort Walton Beach, FL 32548 City/State and Zip Code		
Sachae & beach Community bank Com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Sasha East burn at (850) 244-9900 x 221 Name of Person at (850) 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 & Certified Copy		

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:Superio	r Storage of Pensacola, LLC	
2. (a) Principal office address of limited liability company	v: Yo Beach Community Bank	
(Note: MUST BE STREET ADDRESS)	17 SE Eglin Parkway Ft. Walton Beach, FL 3254	
(b) Mailing address of limited liability company:		
(Note: MAY BE POST OFFICE BOX)		
11/08/2010	L10000116238	
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 States		
Registered Agent:	Richard M. Colbert	
Registered Office Address:	4 Laguna Street, Suite 101 Ft. Walton Beach, FL 32548	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> : NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	W Registered Office address: Gary Johns 17 SE Eglin Parkway	
If the limited liability company is not organized under the legistered that after the change or changes are made, the Fland the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization	
Anthony Hughes, President (CEO) Printed or typed name of signed	-	
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proand I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to sper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.	
Difference of treBrancier Calentin		

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