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J. BRYAN

NOV - 1 2012

**EXAMINER** 

## **COVER LETTER**

Division of Corporations	
SUBJECT:	SL Sebring, 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	g this matter to the following:
Sheila Tubbs	
Name of Person	TAN
SL Sebring, LLC	MIZOCT 31 AM II: 27 SECRETARY OF STATE TALLAHASSEE, FLORID
Firm/Company	SSEE OF PE
2515 Par Lane	Test Test
Address	F STATE FLORIDA
Sebring, Florida 33872	•
City/State and Zip Code	
rstbtubbs@embarqmail.co E-mail address: (to be used for future annual report	om patification)
For further information concerning this ma	
Sheila Tubbs	at ( 863 ) 382-8692
Name of Person	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 follow	ing amount:
\$25 Filing Fee	\$55 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:	SL Sebring, LLC
2.	(a) Principal office address of limited liability company	y: SL Sebring, LLC
	(Note: MUST BE STREET ADDRESS)	2515 Par Lane Sebring, Florida 33872
	(b) Mailing address of limited liability company:	SL Sebring, LLC
	(Note: MAY BE POST OFFICE BOX)	2515 Par Lane Sebring, Florida 33872
	11/23/2010	L100000121918
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:	Warwick R. Furr, II
	Registered Office Address:	22 East Main Street Avon Park, Florida 33825
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent:	Sheila Tubbs
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	SL Sebring, LLC 2515 Par Lane
		Sebring ,FL 33872
co an lia of or	the limited liability company is not organized under the infirmed that after the change or changes are made, the F ad the business office of the registered agent will be identicated to the company, it is hereby confirmed that the change(so the members of the limited liability company or as other the operating agreement of the limited liability company.	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote
Pr	Sheila Tubbs rinted or typed name of signee	_
I co an Ci aa	hereby accept the appointment as registered agent and omply with the provisions of all statutes relative to the provided I am familiar with and accept the obligations of my polyapter 608, F.S. Or, if this document is being filed to muldress, I hereby confirm that the limited liability company	agree to act in this capacity. I further agree to oper and complete performance of my duties, soition as registered agent as provided for in erely reflect a change in the registered office by has been notified in writing of this change.

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

Signature of Registered Agent