

L10000126400

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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D. BRUCE
JAN 09 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida GC Properties, 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:

Lisa Cornatzer, NCCP

Name of Person

Blanco Tackabery

Firm/Company

PO Drawer 25008

Address

Winston-Salem, NC 27114-5008

City/State and Zip Code

brett waters@aon.com

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

For further information concerning this matter, please call:

Lisa Cornatzer

Name of Person

at (336)

293-9000

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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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: Florida GC Properties, LLC

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

(Note: MUST BE STREET ADDRESS)

1100 REYNOLDS BLVD.
WINSTON-SALEM NC 27105-3400 US

(b) Mailing address of limited liability company: 1100 REYNOLDS BLVD.

(Note: MAY BE POST OFFICE BOX)

WINSTON-SALEM NC 27105-3400 US

12/09/2010

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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:

CT CORPORATION SYSTEM

Registered Office Address:

1200 S. PINE ISLAND ROAD #250
FT. LAUDERDALE FL 33324-4413 US

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

NEW Registered Agent:

L. P. HERZOG

NEW Registered Office Address:

240 EAGLE ESTATES DRIVE

(MUST BE FLORIDA STREET ADDRESS)

DEBARY, FL 32713

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.

L. P. Herzog
Signature of a member or authorized representative of a member

L. P. HERZOG, MANAGER

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.

L. P. Herzog
Signature of Registered Agent

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

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA