

L 11 000 018399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

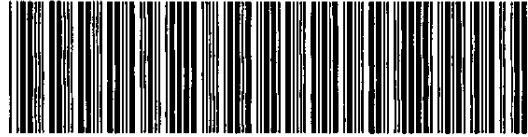
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000273725490

000273725490
06/11/15--01031--004 **25.00

FILED
15 JUN 11 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 11 2015
J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: H&C Islander Bayside, 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:

Jennifer G. Sanchez, Esq.
Name of Person

Sanchez & Ashby, P.A.
Firm/Company

1223 White Street, Unit 104
Address

Key West, FL 33040
City/State and Zip Code

jgsanchez@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer G. Sanchez at (305) 293-0084
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 following 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 605.0114 or 605.0116, 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: H&C Islander Bayside, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
4119 Massard Road
Fort Smith, AR 72903

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 02/11/2011 Date of filing/registration in Florida
4. L11000018391 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Feldman Koenig Highsmith & Van Loon, P.A.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
3158 Northside Drive
Key West, FL 33040

(b) Jennifer G. Sanchez, Esq.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
Sanchez & Ashby, P.A.
NEW Registered Office Address:
1223 White Street, Unit 104
Key West, FL 33040

FILED
15 JUN 11 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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]
Signature of a member or authorized representative of a member

C. David Curry
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 605, 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]
Signature of Registered Agent