## 41000049854

| (Requestor's Name)                      |                    |           |  |  |  |  |
|---|--------------------|-----------|--|--|--|--|
| (Address)                               |                    |           |  |  |  |  |
| (Address)                               |                    |           |  |  |  |  |
| (Cit                                    | ry/State/Zip/Phone | e #)      |  |  |  |  |
| PICK-UP                                 | ☐ WAIT             | MAIL      |  |  |  |  |
| (Bu                                     | siness Entity Nan  | ne)       |  |  |  |  |
| (Document Number)                       |                    |           |  |  |  |  |
| Certified Copies                        | _ Certificates     | of Status |  |  |  |  |
| Special Instructions to Filing Officer: |                    |           |  |  |  |  |
|   |                    |           |  |  |  |  |
|   |                    |           |  |  |  |  |
|   |                    |           |  |  |  |  |

Office Use Only



700297483437

700297483437 04/03/17--01030--024 \*\*25.00



17 APR -5 PM 3: 25

MROG 2017 J. HARRIS

## COVER LETTER.

| _                               | stration Section , sion of Corporations  |              |                      |   |  |  |  |  |
|---------------------------------|--|--------------|----------------------|---|--|--|--|--|
| SUBJECT:                        | B-26 Investments LLC   |              |                      |   |  |  |  |  |
|                                 | Name of Limited Liability Company  |              |                      |   |  |  |  |  |
| Dear Sir or N                   | /ladam:  |              |                      |   |  |  |  |  |
| The enclosed                    | Registered Agent/Registered Off  | ice Change   | e and f              | ee(s) are submitted for filing.                                       |  |  |  |  |
| Please return                   | all correspondence concerning th   | is matter to | the fo               | ollowing:   |  |  |  |  |
| Karen Lies                      | ssmann   |              |                      |   |  |  |  |  |
|                                 | Name of Person   |              |                      | <del></del>   |  |  |  |  |
| B-26 Inves                      | stments LLC  |              |                      |   |  |  |  |  |
|                                 | Firm/Company   |              |                      | <u>-</u>  |  |  |  |  |
| PO Box 65                       | 5417   |              |                      |   |  |  |  |  |
|                                 | Address  |              |                      | •   |  |  |  |  |
| Orange Pa                       | ark, FL 32065  |              |                      |   |  |  |  |  |
|                                 | City/State and Zip Code  |              |                      | _   |  |  |  |  |
| karen@tm                        | pfl.com  |              |                      |   |  |  |  |  |
| E-mail                          | address: (to be used for future ann  | ual report   | notific              | ation)  |  |  |  |  |
| For further ir                  | nformation concerning this matter,   | please cal   | 1:                   |   |  |  |  |  |
| Karen Lies                      | smann  | 904<br>at (  | 4                    | 440-6305  |  |  |  |  |
|                                 | Name of Person   |              |                      | Area Code & Daytime Telephone Number                                  |  |  |  |  |
| Regi<br>Divis<br>Clifte<br>2661 | stration Section sion of Corporations on Building Executive Center Circle shassee, Florida 32301 |              | Regi<br>Divi<br>P.O. | stration Section sion of Corporations Box 6327 ahassee, Florida 32314 |  |  |  |  |
|                                 | osed is a check for the following  | amount:      |                      |   |  |  |  |  |
|                                 | 25 Filing Fee  |              | □ \$55               | Filing Fee & Certified Copy   |  |  |  |  |

INHS18 (2/14)

## 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.                        | Na                             | me of the limited liability company:  B-26 Investm   | ents LL  | .C<br>  |   |  |   |
|---------------------------|--------------------------------|--|--|---|---|--|---|
| 2.                        | (a)                            | Glenn R Mee  | Œ  | o)  |   |  |   |
| _,                        | ()                             | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)   | (-   |   | Mailing address of limited (Note: MAY BE POST   | -  |   |
|                           |                                | 225 College Dr., Unit 65417  |  | PO Box  | x 65417   |  |   |
|                           |                                | Orange Park, FL 32065  |  | Orange  | Park, FL 32065  |  |   |
|                           |                                | 4/27/2011  |  | L11000  | 049854  |  |   |
| 3.                        |                                | Date of filing/registration in Florida   | 4.   |   | Document number   |  |   |
| 5.                        | (a)                            | Glenn R Mee  |  |   |   |  |   |
| ۷.                        | (4)                            | Registered Agent and Registered Office shown on the records of   | the Florida                                    | Dept. of Sta  | <br>nte:  |  |   |
|                           |                                | Registered Office Address (MUST BE FLORIDA STREET A  | ADDRESS  | <u></u>   | <del></del>   |  |   |
|                           |                                | 225 College Dr. Unit 65417   |  |   |   |  | ,•  |
|                           |                                | Orange Park , FL   | 32065  |   | <del>-</del>  | 17 APR                                       |   |
|                           | <i>a</i>                       |  |  |   |   | 1  |   |
| (b)                       |                                | Enter name of NEW Registered Agent and/or NEW Registered Office address:   |  |   | <del></del>   | -TI  |   |
|                           |                                |  |  |   |   | PH   |   |
|                           |                                |  |  |   | <u>-</u>  | <u>ဒ</u> ္                                   |   |
|                           |                                | NEW Registered Office Address:   |  |   |   | CQ.  | भी हैं।<br>-  |
|                           |                                | 13400 Sutton Park Dr., South Suite 1204  |  |   | _   |  |   |
|                           |                                | Jacksonville, FL   | 32224  |   | _   |  |   |
| the<br>age<br>was         | cha<br>nt w<br>s/we            | mited liability company is not organized under the law<br>nge or changes are made, the Florida street address of<br>vill be identical. Or, in the case of a Florida limited lia-<br>tre authorized by an affirmative vote of the members of<br>cles of organization or the operating agreement of the                          | the registability confirmed limited l          | stered offic<br>ompany, it<br>nited liabili           | ce and the business off<br>is hereby confirmed the<br>ity company or as other<br>mpany.                     | ice of the                                   | e registered<br>nange(s)                              |
| <u>_</u>                  | ignat                          | ure of a member or authorized representative of a member   |  |   | Printed or typed name of  | signce                                       |   |
| pro<br>the<br>to i<br>not | visio<br>obli<br>nere<br>ified | by accept the appointment as registered agent and agrouns of all statutes relative to the proper and complete iggions of my position as registered agent as provided by reflect a change in the registered office address, I have a change in the registered office address, I have a change in the registered office address. | ee to act<br>perform<br>d for in (<br>hereby c | in this cap<br>ance of my<br>Chapter 60<br>onfirm tha | pacity. I further agree<br>duties, and I am famid<br>5, F.S. Or, if this doct<br>t the limited liability co | to comp<br>liar with<br>ument is<br>ompany i | oly with the<br>and accept<br>being filed<br>has been |
| Sig                       | natur                          | e of Registered Agent  |  |   |   |  |   |