L11000078665

(Re	equestor's Name)	
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2012 JAN 30 MM , SECRETARY OF STATE

C. LEWIS

JAN 3-1 2012

EXAMINER

COVER LETTER -

TO: Registration Section **Division of Corporations	
	Lollie Mobile Home Service LLC
1	Name of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	gistered Office Change and fee(s) are submitted for filing.
Please return all correspondence co	oncerning this matter to the following:
Gregory W. L	.ollie
Name of Person	
Lollie Mobile Home S	Service LLC
Firm/Company	7CT VIOC LLO
1001 5 1 4	•
1961 Porter Av	<u>renue</u>
Address	
Grand Ridge FL	
City/State and Zip Co	ode
Iollieservice@embar E-mail address: (to be used for future an	rgmail.com
E-mail address; (to be used for future and	itual report notification)
For further information concerning	this matter, please call:
Gregory W. Lollie	at (850) 209-2033
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDR	ESS: MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	-
Enclosed is a check for the	e 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 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:Lol	lie Mobile Home Service LLC
2. (a) Principal office address of limited liability compar	ny: 1961 Porter Avenue
(Note: MUST BE STREET ADDRESS)	Grand Ridge FL 32442
(b) Mailing address of limited liability company:	1961 Porter Avenue
(Note: MAY BE POST OFFICE BOX)	Grand Ridge FL 32442
07/08/2011	L11000078665
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:	Gregory W. Lollie
Registered Office Address:	1961 Porter Avenue
	Grand Ridge FL 32442 FF
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address
NEW Registered Agent:	Shannon Y. Lollie
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1961 Porter Avenue
(MUST DE LEGIDA STREET ADDRESS)	Grand Ridge FL ,FL 32442
If the limited liability company is not organized under the confirmed that after the change or changes are made, the hand the business office of the registered agent will be identiability 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. Signature of a member or authorized representative of a member	Florida street address of the registered office stical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote
Gragon, W. Lollin	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the providence of and I am familiar with and accept the obligations of my portugation of the company of t	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office sy has been notified in writing of this change.

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

INHS18 (05/08)