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Certified Copies	Certificates	s of Status		
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COVER LETTER

Division of Corporations					
SUBJECT:	Art	hur F	Robins	son LL	С
- , 	Name of Li	imited	Liabili	ty Comp	pany
Dear Sir or Madam:					
The enclosed Registered Age	nt/Registered Of	ffice C	hange	and fee(s) are submitted for filing.
Please return all corresponder	nce concerning t	his ma	itter to	the follo	wing:
Arthur J F	Robinson Jr Person			_	
Arthur Firm/Con	Rohinso	n	<u>LL</u>	<u>C</u>	
1424 Hea	ather Court ss				
St. Augustir City/State and	ne, FL 32092 d Zip Code			_	
arobinson@c E-mail address: (to be used for fi	onsultant.com	tification	n)	-	
For further information conce	rning this matte	r, plea	se call:		
Arthur J Robinso	n Jr.	at (904	_)	534-5375
Name of Person			A	Area Code	& Daytime Telephone Number
STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, Florida 323	s Circle		Regi Divi P.O.	istration (sion of C Box 632	Corporations
Enclosed is a check f	or the followin	g amo	unt:		
\$25 Filing Fee		\$55 Filing Fee & Certified Copy			

TO: Registration Section

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:	Arthur Robinson LLC
2. (a) Principal office address of limited liability company	y: 1424 Heather Court
(Note: MUST BE STREET ADDRESS)	St. Augustine, FL 32092
(b) Mailing address of limited liability company:	1424 Heather Court
(Note: MAY BE POST OFFICE BOX)	St. Augustine, FL 32092
July 12, 2011	L11000080017
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:	United States Corporation Agents, Inc
Registered Office Address:	13302 Winding Oak Court A
	13302 Winding Oak Court A Tampa, FL 33612
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE'</u> <u>NEW Registered Agent:</u> <u>NEW Registered Office Address:</u> <u>(MUST BE FLORIDA STREET ADDRESS)</u>	Arthur J Robinson Jr. 1424 Heather Court
(MUSI BE FLORIDA STREET ADDRESS)	St. Augustine ,FL32092
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and 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 or as other or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member Arthur J Robinson Jr. Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pranal I am familiar with and accept the obligations of my pochapter 608 F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	E -6 PH 3:
Signature of Register Agent	

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