

L11000145601

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

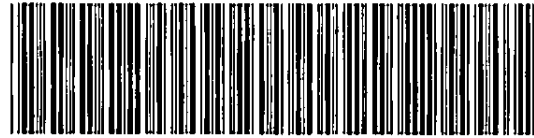
(Business Entity Name)

(Document Number)

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STATE OF ILLINOIS  
FALL EMBASSY

2018 OCT -1 AM 11:37

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OCT 06 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DCP Management, 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:

C. David Peacock

\_\_\_\_\_  
Name of Person

DCP Management, LLC

\_\_\_\_\_  
Firm/Company

20 Towne Drive, Ste 113

\_\_\_\_\_  
Address

Bluffton, SC 29910

\_\_\_\_\_  
City/State and Zip Code

pkox@bellsouth.net

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

For further information concerning this matter, please call:

C. David Peacock

843

707-6668

at ( )

\_\_\_\_\_  
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

**FILED**  
2010 OCT - 1 AM 11:37  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS

**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: DCP Management, LLC
2. (a) C. David Peacock  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
7 Simmonsville Rd., Ste 500  
Bluffton, SC 29910
- (b) C. David Peacock  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
20 Towne Dr., Ste 113  
Bluffton, SC 29910
3. 12/30/2011  
Date of filing/registration in Florida
4. L11000145601  
Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
Watson Sewell, PL  
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)  
5365 E CO HWY 30A, Suite 105  
Seagrove Beach, FL 32459
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  
The Critzer Law Firm, P.A.  
NEW Registered Office Address:  
12889 US Highway 98 W. Unit 110A  
Miramar Beach, FL 32550-3241

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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.

C. David Peacock  
Signature of a member or authorized representative of a member

C. David Peacock  
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