

L12000009734

(Requestor's Name)

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TALLAHASSEE, FLORIDA

*[Handwritten signature]*

J. BRYAN

NOV - 8 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 10, 2012

NEIL SAYDAH  
SAYDAH LAW FIRM  
2572 WEST S.R. 426, SUITE 2032  
OVIEDO, FL 32765

SUBJECT: SCENIC 102, LLC  
Ref. Number: L12000009734

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TALLAHASSEE, FLORIDA

We have received your document for SCENIC 102, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

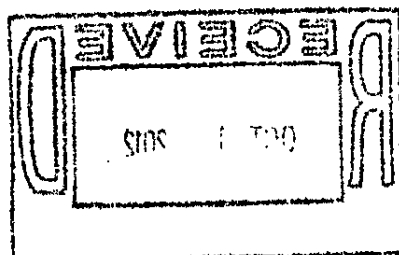
We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan  
Regulatory Specialist II

Letter Number: 312A00025073



COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SCENIC 102, 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:

Neil A. Saydah, Esq.  
Name of Person

Saydah Law Firm  
Firm/Company

2572 West S.R. 426, Suite 2032  
Address

Oviedo, FL 32765  
City/State and Zip Code

nas@saydahlawfirm.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Neil A. Saydah at (407) 956-1080  
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

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TALLAHASSEE, FLORIDA

**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: SCENIC 102, LLC

2. (a) Principal office address of limited liability company: 420 C. Bayshore Dr.

(Note: **MUST BE STREET ADDRESS**)

Miramar Beach, FL 32550

(b) Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

SAME AS ABOVE

3. Date of filing/registration in Florida: 1-18-2012

4. Document number

L1200000973

5. (a) Registered Agent and Registered Office shown on the records of the Florida Department of State:

Registered Agent:

Saydah Law Firm

Registered Office Address:

121 S. Orange Ave, Suite 1500  
Orlando, FL 32801

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

Saydah Law Firm

**NEW** Registered Office Address:

2572 West S.R 426

(**MUST BE FLORIDA STREET ADDRESS**)

Suite 2032  
Dunedin, FL 32745

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 of a member or authorized representative of a member

NUEL A SAYDAH

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 608, 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 of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00