

L12000069332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
AUG 23 2012  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Malibu Fox, 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:

Danielle Garrow  
Name of Person

Malibu Fox, LLC  
Firm/Company

3231 Dick Wilson Dr.  
Address

Sarasota, FL 34240  
City/State and Zip Code

danielle.r.garrow@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Danielle Garrow at (843) 437-7639  
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

**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: Malibu Fox, LLC  
2. (a) Principal office address of limited liability company: 3231 Dick Wilson Dr.  
Sarasota, FL 34240  
**(Note: MUST BE STREET ADDRESS)**

(b) Mailing address of limited liability company: 3231 Dick Wilson Dr.  
Sarasota, FL 34240  
**(Note: MAY BE POST OFFICE BOX)**

6/18/12  
3. Date of filing/registration in Florida

L12000069332  
4. Document number

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

Registered Agent: Danielle Garrow  
Registered Office Address: 5205 TRAPANI COVE  
LAKE MARY, FL 32746

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AUG 22 12 PM 12:38  
STATE OF FLORIDA

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
**NEW Registered Agent:** Danielle Garrow  
**NEW Registered Office Address:** 3231 Dick Wilson Dr.  
**(MUST BE FLORIDA STREET ADDRESS)** Sarasota, FL 34240

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.

Danielle Garrow  
Signature of a member or authorized representative of a member

Danielle Garrow  
Printed or typed name of signer

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.

Danielle Garrow  
Signature of Registered Agent