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SIVISION OF CORPERATE

RA (ch 8)

COVER LETTER

TO:	_	stration Section ion of Corporations					
SUBJE	·CT·	85252 JOANN ROAD, LLC					
SOBJE		Name of Limited Liability Company					
Dear Si	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:							
Karl E	E. Lav	vhon					
		Name of Person					
85252	2 JOA	ANN ROAD, LLC					
		Firm/Company					
1532	Hallid	day Lane South					
		Address					
Jacks	onvil	e, FL 32207					
		City/State and Zip Code					
elawl	hon@	bellsouth.net					
E	-mail	address: (to be used for future ann	ual report notification)				
For furt	ther in	formation concerning this matter,	please call:				
Karl E	E. La	whon	904 306-9082				
		Name of Person	Area Code & Daytime Telephone Numb				
	Regis Divis Clifte 2661	stration Section sion of Corporations on Building Executive Center Circle hassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
	Enclosed is a check for the following amount:						
	2 \$2	25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				

INHS18 (2/14)

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. Na	ame of the limited liability company:85252 JOA	NN ROA	AD, LLC		
2. (a)	1532 Halliday Lane South	(b	(b) 1532 Halliday Lane South		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(3		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Jacksonville, FL 32207		Jackson	ville, FL 32207	
					
	June 5, 2012		L120000	75045	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Karl B. Hanson, Jr.				
()	Registered Agent and Registered Office shown on the records of 1532 Halliday Lane South	f the Florida	Dept. of State	:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS			
	regional office (tables)	71121211000	2	21 SY	
	Jacksonville	 , 32207		NISION OF CHAPTER AND	
	, F	L		7 2 N	
(b)	Karl E. Lawhon			ini Cal	
(0)	Enter name of NEW Registered Agent and/or NEW Registere	d Office ad	dress:	1 % //	
	1532 Halliday Lane South			2: 59	
	NEW Registered Office Address:				
	Jacksonville, F.	_L _32207			
the cha agent was/w	imited liability company is not organized under the large or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regis liability co of the lim e limited l	stered office ompany, it is ited liability iability com	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in apany.	
	Hay & Lawken	Ka	rl E. Lawh		
_	iture of a member or authorized representative of a member			Printed or typed name of signee	
I here provis the ob- to mer notifie	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, I d in writing of this change.	gree to act e perform ed för in (I hereby co	in this cape ance of my c Chapter 605 onfirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been	
Signati	re of Registered Agent				

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