

L12000100428

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

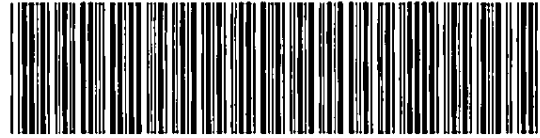
(Business Entity Name)

(Document Number)

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STATE OF TEXAS
COMMISSIONER OF PUBLIC SAFETY
2018 OCT -1 AM 11:37

FILED

D. BRUCE
OCT 06 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: High Hope Way, 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

High Hope Way, LLC

Firm/Company

20 Towne Dr., Ste 113

Address

Blufton, 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 at (843) 707-6668

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
STATE SECRETARY OF REVENUE

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: High Hope Way, LLC

2. (a) <u>C. David Peacock</u> Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>7 Simonsville Rd., Ste 500</u> <u>Bluffton, SC 29910</u>	(b) <u>C. David Peacock</u> Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>20 Towne Dr., Ste 113</u> <u>Bluffton, SC 29910</u>
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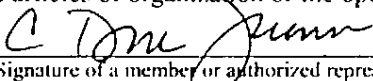
3. <u>8/3/2012</u> Date of filing/registration in Florida	4. <u>L12000100428</u> Document number
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5. (a) Watson Sewell, PL
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
5410 E. Co. Hwy. 30A, Suite 202
Seagrave Beach, FL 32459

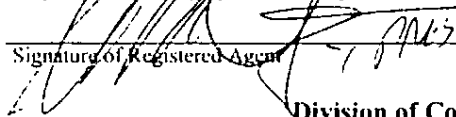
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
The Critzer Law Firm, P.A.
NEW Registered Office Address:
12889 US Highway 98 W. Unit 110A
Miramar Beach, FL 32550-3241

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 DEPARTMENT OF STATE
 PALM BEACH COUNTY, 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.

 Signature of a member or authorized representative of a member	<u>C David Peacock</u> Printed or typed name of signee
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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 of Registered Agent