

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(,,,
(Document Number)
(Boosing in 1987)
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600334789876

09/30/19--01012--018 \*\*55.00

19 SEP 30 AH 9: 07

Ra Chango

OCT 1 S 2019

D'CUSHING

#### **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Blackman Country Store 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:		
ORBTINA G. Pennycock Name of Person		
Blackman Country Store LLC Firm/Company		
7580 HWY 189 N. Address		
Baker FL 3253  City/State and Zip Code		<u> </u>
Penny Cook 1@ MSN. Com  E-mail address: (to be used for future annual report notification)	19 SEP	SECRET
For further information concerning this matter, please call:	30	SAN CO
ORISTIA G. Pennycookat (850) 902 - 5859  Name of Person Area Code & Daytime Telephone Number	AM 9: 07	OF STATE REPORATION
		ঠে

## 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

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.

Pioriu		,	^			
1. Na	me of the limited liability company:	ickm	en Coust	try Stone LLC	· · · · · · · · · · · · · · · · · · ·	
2. (a)			(b)	,		
Z. (a)	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny:	(0)	Mailing address of limit		
	7580 Huy 189N			7580 Huy 1	89 N	
	Baker 71 32531			Baker 71	32531	
	August 28,2012			120001105	69	
3.	Date of filing/registration in Florida		4.	Document number	r	
5. (a)	Sherry Ann Brewer Registered Agent and Registered Office shown on the rec	Blac ords of the	<u>Linan Curi</u> Florida Dept. of	try Store LLC State:		
S	7580 HWY 189N Baker Registered Office Address (MUST BE FLORIDA ST	11	<del>3253</del> 1 9		wer Blackin	an Country!
	7580 Awy 189 N		<u> </u>	<del></del>		ŕ
	Baker	FL	32531	<u></u>		
	00001	1 0	1		; 	≟ ≦σ
(b)	CKISTING G. PENNY	(000)	<u></u>		ua (	
	Enter name of NEW Registered Agent and/or NEW Reg	gistered Of	fice address:		E)	岩窟 心性
					30	195E
	NEW Designation Address			<u></u>	7	
	NEW Registered Office Address:	١				P S
	7580 HWX 189 K	),	<u>-</u>		9. 0.	ATE .
	Baker	, FL	3253	1		SNS
If the 1	imited liability company is not organized under	the laws	of the State of	Florida, it is hereby c	onfirmed that afte	er
the cha	inge or changes are made, the Florida street add	ress of th	e registered of	fice and the business of	office of the regist	ered
agent v	vill be identical. Or, in the case of a Florida limere authorized by an affirmative vote of the men	nted habi nbers of t	nty company. he limited liah	it is hereby confirmed pility company or as of	i that the change(s herwise provided	in
the arti	gles of organization or the operating agreement	of the lin	nited liability	company.	providen	
_/_	hemy A. Burn		She	CCY A BREWS	e/	
	ture of a member or authorized representative of a member			,	<del></del>	
I here provisi the obi to mer notifie	by accept the appointment as registered agent a ions of all statutes relative to the proper and col ligations of my position as registered agent as p ely reflect a change in the registered office addi d in writing of this change.				ree to comply with miliar with and ac ocument is being a company has bea	the ccept filed en
Signatu	1 Stina D. Fennyout St re of Registered Agent	P1 2	5,2019	7		

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