

L12000 117043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

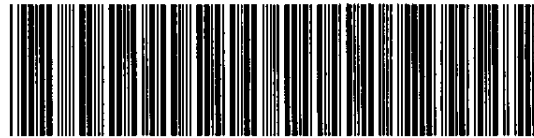
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300260530553

06/05/14--01011--008 **25.00

FILED STATE
SECRETARY OF
TREASURY
14 JUN -5 PM 2:43

LLC RO Change

JUN 18 2014

T. CARTER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PALADIN MEDIATION 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:

MICHAEL L. DELONG
Name of Person

PALADIN MEDIATION LLC
Firm/Company

P.O. Box 10657
Address

DAYTONA BEACH, FL 32120
City/State and Zip Code

PALADINMEDIATION@JUNO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL L. DELONG at (561) 315-2381
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

**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: PALADIN MEDIATION LLC.
2. (a) MICHAEL L. DELONG (b) MICHAEL L. DELONG
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
101 SILVER FERN COURT P.O. BOX 10657
PORT ORANGE, FL 32128 DAYTONA BEACH, FL
9-12-2012 L12000117043 32120
3. Date of filing/registration in Florida 4. Document number

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

OLD MICHAEL L. DELONG
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
2015 TEAKWOOD LANE
PORT ORANGE, FL 32128

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

NEW MICHAEL L. DELONG MGR./OWNER
NEW Registered Office Address:
101 SILVER FERN COURT
PORT ORANGE, FL 32128

14 JUN -5 PM 2:43
STATE
TALLAHASSEE
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.

Michael L. DeLong
Signature of a member or authorized representative of a member

MICHAEL L. DELONG
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 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.

Michael L. DeLong
Signature of Registered Agent