L12000/41246

. (Re	equestor's Name)	
(Ad	Idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies		of Status
Special Instructions to Filing Officer:		

Office Use Only

APR 15 MB B. KOHR



900245459739

03/11/13--01009--003 **25.00

TILED

13 APR 12 AM 8: 40

SEGRETARY OF STATE
ANASSEE, FLORIDI



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 29, 2013

DAVID DEREN BRANNAN LAND SURVEYING, LLC 3008 N.W. 13TH STREET, STE. A GAINESVILLE, FL 32609

SUBJECT: BRANNAN LAND SURVEYING LLC

Ref. Number: L12000141246

We have received your document for BRANNAN LAND SURVEYING LLC anyour check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please SIGN and return the enclosed document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Buck Kohr Regulatory Specialist II

Letter Number: 313A00007522

COVER LETTER

Registration Section Division of Corporations

BRANNAN LAND SURVEYING, LLC

Name of Limited Liability Company

Dear Sir or Madam:

A RANGE IN SHORE THE SECOND SHOWS AND THE SECOND SH The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing

Please return all correspondence concerning this matter to the following:

DAVID DEREN

Name of Person

BRANNAN LAND SURVEYING, LLC

Firm/Company

3008 NW 13TH STREET, STE.A

Address

GAINESVILLE, FL 32609

City/State and Zip Code

brannaninc@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Deren

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 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.

G , , ,	
1. Name of the limited liability company: Brannan Land Survey	ing, LLC
6 (
 (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS) 	Gainesville, FL 32607
(NOC. MOST BE STREET ADDRESS)	7.54. 1
	6910 W. University Ave. Stc. 1 Gainesville, Fl. 32607
(b) Mailing address of limited liability company:	6910 W. University Ave. Sto. 1
(Note: MAY BE POST OFFICE BOX)	Gainesville, Fl. 32607
11-7-2012	L12000141246
3. Date of filing/registration in Florida	4. Document number
5. Date of ming/registration in Florida	T. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
	•
Registered Agent:	David Deren
Registered Office Address:	6910 W. University Ave, Ste. 1
Registered Office Address.	Gainesville, FL 32607
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
(v) Little vi 11217 steelibroi en 112011 tala vi 112	The Library of Control and the Control of Co
NEW Registered Agent:	
NIPSU Decistand Office Address	2000 NIIN 424- Charak CTT A
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3008 NW 13th Street, STE. A Gainesville, FL 32609
MOST BE TEORIDA STREET ADDRESS	.FL
If the limited liability company is not organized under the confirmed that after the change or changes are made, the I and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherw the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida etreet address of the registered office
organizate of a member of authorized representative of a member	
David Deren	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the plant I am familiar with and accept the obligations of my plant of the plant of the plant of the plant of the comparate of the plant of t	osition as registered agent as provided for in erely reflect a change in the registered office
Signature of Registered Agent	

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