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TO:

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Registration Section

Division of Corporations FREEPORT LANDING, LLC SUBJECT: ____ 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: Robert E. McGill, III Name of Person Robert E. McGill, III, P.A. Firm/Company 36008 Emerald Coast Pkwy., Suite 301 Address Destin, FL 32541 City/State and Zip Code sherri@bobmcgill.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Robert E. McGill, III Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 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. N	ame of the limited liability company: FREEPORT	LANDING, LL		
2. (a)	36008 Emerald Coast Pkwy., Suite 301	(b) 36008 Emerald Coast Pkwy., Suite 301 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			
	Destin, FL 32541	Destin, FL 32541		
	11/28/2012	L12000	149135	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Registered Agent and Registered Office shown on the records of t	- Flacillo David CC		
	Corporation Service Company	е гюпца Берг. от 5	late.	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	1201 Hays Street			
	Tallahassee	32301	14 NOV 10 AH SECRETARY OF TALLAHASSEE.	
			SECRETARY OF ALLAHASSEE, F	
(b)	Enter name of NEW Registered Agent and/or NEW Registered		TARY L	
	Enter name of NEW Registered Agent and/or NEW Registered	mce address:	E OF T	
	Robert E. McGill, III		3: 52 F STATE FLORID	
	NEW Registered Office Address:		- RIGHT	
	36008 Emerald Coast Pkwy., Suite 301		→	
	Destin	32541		
the cha agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	s of the State of the registered off bility company, ithe limited liabi imited liabi	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.	
Sign	ature of a member or authorized representative of a member	Robert E. N	· · · · · · · · · · · · · · · · · · ·	
I here provis the ob- to mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflectia chappe in the registered office address, I have a few this change.	e to act in this co verformance of m for in Chapter 6 vereby confirm tha	Printed or typed name of signee apacity. I further agree to comply with the sty duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been	