

L130000000302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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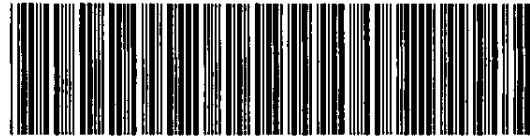
(Business Entity Name)

(Document Number)

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2013 JAN 14 PM 3:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JAN 15 2013  
J. BRYAN

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Beardsley & Galvin, PL  
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:

Malcolm P. Galvin III

Name of Person

Beardsley & Galvin

Firm/Company

390 N. Orange Avenue, Suite 2300

Address

Orlando, Florida, 32801

City/State and Zip Code

mpg3@beardsleygalvin.com

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

For further information concerning this matter, please call:

Grant A. Beardsley at (321) 445-9933

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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**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.*

1. Name of the limited liability company: Beardsley & Galvin, PL

2. (a) Principal office address of limited liability company: 390 N. Orange Avenue, Suite 2300  
Orlando, Florida, 32801  
**(Note: MUST BE STREET ADDRESS)**

(b) Mailing address of limited liability company: 390 N. Orange Avenue, Suite 2300  
Orlando, Florida, 32801  
**(Note: MAY BE POST OFFICE BOX)**

1-2-2013

3. Date of filing/registration in Florida

L13000000302

4. Document number

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

Registered Agent:

Malcolm P. Galvin III

Registered Office Address:

121 S. Orange Avenue, Suite 1500  
Orlando, Florida, 32801

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

NEW Registered Agent:

Malcolm P. Galvin III

NEW Registered Office Address:

390 N. Orange Avenue, Suite 2300

**(MUST BE FLORIDA STREET ADDRESS)**

Orlando, FL 32801

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.

MPGIII

Signature of a member or authorized representative of a member:

Malcolm P. Galvin III

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 608, 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.*

MPGIII

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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