

L13000001109

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

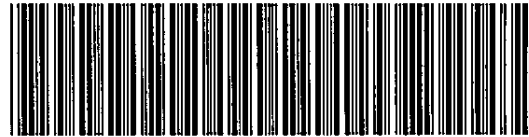
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Burch JAN 3 2014

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VIGILANTER LLC

Name of Corporation

DOCUMENT NUMBER: 13000001109

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brent Gregory

Name of Contact Person

VIGILANTER LLC

Firm/Company

25110 Chipshot Court

Address

Sorrento, FL 32776

City/State and Zip Code

gregory.brent@gmail.com

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

For further information concerning this matter, please call:

Brent Gregory

Name of Contact Person

at (352) 735-8335

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 13, 2013

BRENT GREGORY
25110 CHIPSHOT COURT
SORRENTO, FL 32776

SUBJECT: VIGILANTER LLC
Ref. Number: L13000001109

We have received your document for VIGILANTER LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You submitted the wrong type of form, proper forms are enclosed.

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.

Tim Burch
Regulatory Specialist II

Letter Number: 113A00028401

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: VIGILANTER LLC

2. (a) Principal office address of limited liability company: 25110 Chipshot Ct.
(Note: **MUST BE STREET ADDRESS**) Sorrento, FL 32776

(b) Mailing address of limited liability company: 2880 David Walker Drive
(Note: **MAY BE POST OFFICE BOX**) # 148
Eustis, FL 32726

January 1, 2013
3. Date of filing/registration in Florida

13000001109
4. Document number

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

Registered Agent:

Brent Gregory

Registered Office Address:

13 DEC - 9 PM 3:00
SECRETARY OF STATE
FILED

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

NEW Registered Agent:

Brent Gregory

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

25110 Chipshot Ct.
Sorrento, FL 32776
FL

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.

[Signature]
Signature of a member or authorized representative of a member

Brent Gregory, MGRM
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.

[Signature]
Signature of Registered Agent

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

FILING FEE: \$25.00