## L13000026301

s Name)					
(Address)					
(Address)					
Zip/Phone #)					
WAIT MAIL					
(Business Entity Name)					
(Document Number)					
ertificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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## **COVER LETTER**

Po: Registration Section Division of Corporations				
SUBJECT:	Condon	Enterprise of L	imited Liability Company	
Dear Sir or Madan	1:			
The enclosed Regi	st <b>ered Agent/</b> F	Registered Office Ch	nange and fee(s) are submitted for filing.	
Please return all co	orrespondence	concerning this matt	ter to the following:	
Zacha	Name of	Condon		
Condon	Enterp Firm/Co	mpany LLC	<del></del>	
3915	Diana (	C t		
Panama Cit	Seach, City/State ar	FL 32408 nd Zip Code		
Z 5 E-mail addre	(OADOA) ss: (to be used	e c mail (em for future annual re	one port notification)	
For further informa	ation concerni	ng this matter, please	e call:	
Zachary	J Con	at (	781 ) 738 - 1825 Area Code & Daytime Telephone Number	
Registratio Division o Clifton Bu 2661 Exec	f Corporations	iircle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:				
☑ \$25 Fili	ng Fee		□ \$55 Filing Fee & Certified Copy	

INHS18 (2/14)

## 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 FOR FOR		
1. Na	ame of the limited liability company: Condon Enterp	rises, LLC
	3915 Diana Ct Panama City Beach FL 32468 (b)	_
2. (a)	Principal office address of limited liability company:  (Nate: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	2/20/13	L 13000026301
3.	Date of filing/registration in Florida 4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept.	of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  Vaited States Corperation Agents INC	 デン <b>さ</b>
1	3302 Winding Oak Court A, Tampa FL 33612	्रेट : <del>पर्य</del>
		: 5
(b)	Zachary J Condon	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :	2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	NEW Registered Office Address:	
	3915 Diana Court	
	Panama City Beach FL 3240	8
the cha agent v was/wo	limited liability company is not organized under the laws of the State ange or changes are made, the Florida street address of the registered will be identical. Or, in the case of a Florida limited liability comparere authorized by an affirmative vote of the members of the limited lices of organization or the operating agreement of the limited liability.	office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company.
Signa	ature of a member or authorized representative of a member	Printed or typed name of signee
I here.	by accept the appointment as registered agent and agree to act in the ions of all statutes relative to the proper and complete performance eligations of my position as registered agent as provided for in Chapterly reflect a change in the registered office address, I hereby confirmed in writing of this change.	is capacity. I further agree to comply with the
Signani	ure of Begistered Agent	
ىسىسى	are or degistered regar	

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