

L13000078673

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700283911787

04/08/16--01014--007 **25.00

FILED
2016 APR - 8 P 3:06
CLERK OF STATE
TALLAHASSEE, FLORIDA

APR 11 2016

S MASON

TRIMBLE & ASSOCIATES, LTD.

Attorneys at Law

10201 Wayzata Boulevard
Suite 130
Minneapolis, Minnesota 55305

Telephone: 952-797-7477
Facsimile: 952-797-5858
Email: trimblelegals@earthlink.net

April 4, 2016

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

Re: SLM Properties, LLC

Dear Sir/Madam:

Enclosed for filing with your office relative to SLM Properties, LLC, a Florida limited liability company ("Company"), please find the Statement of Change of Registered Office or Registered Agent and Cover Letter.

We have also enclosed a check in the amount of \$25.00 for applicable filing fees.

It is our understanding you will forward confirmation of filing to Stephanie L. Moore, Company's Member, pursuant to the documents enclosed.

Please contact the undersigned as to any questions. Thank you.

Sincerely,



Tony P. Trimble
/mdf
enc.

cc: Stephanie L. Moore (via email)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SLM PROPERTIES, LLC

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:

Stephanie L. Moore

Name of Person

Firm/Company

637 Eastern Lake Road

Address

Santa Rosa Beach, FL 32459

City/State and Zip Code

sImooreinmn@aol.com

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

For further information concerning this matter, please call:

Tony P. Trimble, Trimble & Associates, Ltd.

at (952) 797-7477

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 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. Name of the limited liability company: SLM PROPERTIES, LLC

2. (a) 637 Eastern Lake Road (b) 637 Eastern Lake Road

Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

Santa Rosa Beach, FL 32459

Santa Rosa Beach, FL 32459

May 30, 2013

L13000078673

3. Date of filing/registration in Florida

4. Document number

5. (a) CT Corporation System

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1200 South Pine Island Road

Plantation, FL 33324

(b) Stephanie L. Moore

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

NEW Registered Office Address:

637 Eastern Lake Road

Santa Rosa Beach, FL 32459

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.

Stephanie L. Moore

Signature of a member or authorized representative of a member

Stephanie L. Moore, Member

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 605, 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.

Stephanie L. Moore

Signature of Registered Agent

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

FILED
2015 APR - 8 P 3:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA