

U3000098426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

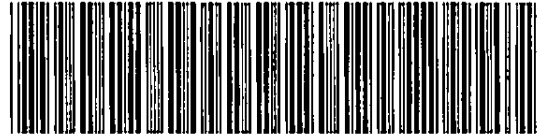
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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SECURE FILING DIVISION  
DIVISION OF CORPORATIONS  
17 SEP - 7 AM 10:49

M. MILLIGAN  
SEP 13 2017

49



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 7, 2017

CYNTHIA CROOM  
3217 SW 35TH BLVD  
GAINESVILLE, FL 32608

SUBJECT: MAXIMILLIAN DESIGNS, LLC  
Ref. Number: L13000098426

We have received your document for MAXIMILLIAN DESIGNS, 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):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Deborah Bruce  
Regulatory Specialist III

Letter Number: 617A00015950



DB

2017 OCT 17 10:14:28  
TALLAHASSEE, FL

August 15, 2017

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

Dear Sirs:

Recently, we filed forms to change the Registered Agent for numerous LLC's. Each form was accompanied by a \$35.00 check, all of which have been processed by the Department of State. We have since been advised that the forms we utilized were incorrect, and the proper filing fee is \$25.00.

Enclosed are Cover Letters and Statements of Change for each of the Entities listed below. We request that these forms be filed, and that a check be issued to each of the following, in the amount of \$10.00 as a refund of the \$10.00 overpayment for each filing.

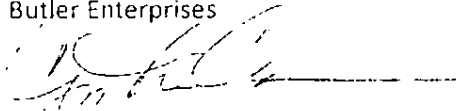
Maxster LLC	L14000085543
Zane Grey LLC	L11000116669
Pisgah Pike LLC	L12000103883
Butler Investments Company LLC	L00000002311
Butler Development Company LLC	L00000002312
Lakeshore Towers LLC	L14000056080
Esplanade at Butler Plaza LLC	L16000003123
Maxwell Investments LLC	L14000052239
Wonderful Wizards LLC	L16000179380
Stengel Field North LLC	L15000091585
Shelt Investments LLC	L15000179004
Invictus Investments LLC	L15000111602
Pitt Special LLC	L14000085541
Pitt Special Odyssey LLC	L15000195368
Roads of Gold LLC	L16000187198
BP North Retention LLC	L14000004200
Maximillian LLC	L13000033789



Maximillian Designs LLC	L13000098426
Maxwell Properties of Gainesville LLC	L14000085672
Bodester LLC	L15000092331
Melrose Bay LLC	L13000033783
Maxmillian Investments LLC	L12000090500
Zenyatta, LLC	L10000123177
Stengel Field LLC	L13000156358
S. Clark Butler Proerties Ltd	A98000002726

All of the refund checks may be mailed to 3217 SW 35<sup>th</sup> Blvd., Gainesville FL 32608.

Butler Enterprises



Cynthia Croom  
Sr. Financial Analyst

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Maximillian Designs 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:

Cynthia Croom  
Name of Person

Butler Enterprises  
Firm/Company

3217 SW 35th Blvd  
Address

Gainesville FL 32608  
City/State and Zip Code

corporate@butlerenterprises.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cynthia Croom at ( 352 ) 372-3581 X 317  
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

*Repaid*

**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: Maximillian Designs LLC

2. (a) <u>Maximillian Designs LLC</u> Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>3217 SW 35th Blvd</u> <u>Gainesville FL 32608</u>	(b) <u>Maximillian Designs LLC</u> Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>3217 SW 35th Blvd</u> <u>Gainesville FL 32608</u>
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3. <u>07/11/2013</u> Date of filing/registration in Florida	4. <u>L 13000098426</u> Document number
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5. (a) Presnick, Cory  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
3217 SW 35th Blvd  
Gainesville, FL 32608

17 SEP -7 AM 10:49  
 DEPARTMENT OF STATE  
 DIVISION OF CORPORATIONS


(b) Deborah J. Butler  
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:  
3217 SW 35th Blvd  
Gainesville, FL 32608

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 of a member or authorized representative of a member	<u>Deborah J. Butler</u> Printed or typed name of signee
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*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.*

  
 Signature of Registered Agent