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SECRETARY OF STATE
TALLABASSEE, FLORIDA

FEB 1 0 2015 T. CARTER



TO: Registration Section Division of Corporations SUBJECT: 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: Name of Person For further information concerning this matter, please call: Area Code & Daytime Telephone Number MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount:

□ \$55 Filing Fee & Certified Copy

□ \$25 Filing Fee



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 21, 2015

VICTOR C RAY REGAL LANDSCAPE AND DESIGN, LLC 2228 BENHOGAN PLACE THE VILLAGES, FL 32162 US

SUBJECT: REGAL LANDSCAPE AND DESIGN, LLC

Ref. Number: L13000101892

We have received your document for REGAL LANDSCAPE AND DESIGN, 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):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6050.

Tina D Carter Regulatory Specialist

Letter Number: 615A00001216

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. Na	me of the limited liability company:	Kegal	Landic.	npc a	Dign	, UC
2. (a)	2228 Benhagan Place	(b)	P. O	. Box	1509	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			dress of limited l		
		162_	P D.	1d000d,		3478
3.	07-30-2012 Date of filing/registration in Florida			3,76676 ent number	51	
5. (a)	Corporation Service (Registered Agent and Registered Office shown on the records of	Compa	inu	ent number		
	Registered Office Address (MUST BE FLORIDA STREET	Let TADDRESS)				IAS
	TollahassEE, &				5 FE	ECRE
	, F	L_323	D/		B -9	TAR HASS
(b)	Victor Ray		· 			Y OF S
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office address	;		AH 11: 24	ORII
	2228 Bentrogan	Place			+-	A A
	NEW Registered Office Address:					
	The Villages, F	FL 3 21	62			
the cha agent v was/wa	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members	laws of the Stat of the registere liability compa s of the limited	e of Florida, it d office and the any, it is hereby liability compa	e business offi confirmed th	ce of the r at the char	egistered 1ge(s)
	ture of a member or authorized representative of a member	ne limited habi	VICTO	or typed name of	2 <u>7</u> Signer	
I here provisi the obl to merc notified	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provid ely reflect a change in the registered office address, d in writing of this change.	gree to act in t ie performance ded for in Chap I hereby confi	his canacity. I	further agree	- ₁ to comply	with the nd accept eing filed is been
Signatu	are of Registered Agent					