<u>U3000111159</u>

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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SECRLEGAT OF SINGLANDS

B. BOSTICK

SEP 0 6 2013

EXAMINED

COVER LETTER

TO: Registration Section Division of Corporations		•
Debute IV	ASSOCIATES L ed Liability Company	ic
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitt	ted for filing.
Please return all correspondence concerning this r	matter to the following:	
PETER MURRAY Name of Person		
PUTTER ASSOCIAT		
550 PUTTER LAN Address	<u>E</u>	
LONG-BOAT KEY, FLA	7 34228	2013 SEP -5 TALLAHASSE
E-mail address: (to be used for future annual report notifica	ition)	SSEEL FLOR
For further information concerning this matter, pl		36 31D/
Name of Person	Area Code & Daytime Telep	hone 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 an	nount:	

☐ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

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.

٠.	Nar	ne of the limited liability company:/u1	TER ASSOCIATES, LLC
2.	(a)	Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)	
		(Note: MOST BE STREET ADDRESS)	Long BOAT KOY, FLA 34228
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	LONGBOAT KOY, FLA 34228
		(Note: MAT DE LOST OF FICE BOX)	- CONSONT REG , FLA 34228
	_	8/6/13	L 13 000 11 1159
3.	Dat	e of filing/registration in Florida	4. Document number
5.	(a)	Registered Agent and Registered Office shows	•
		Registered Agent:	COLPOLATION SERVICE Co.
		Registered Office Address:	1201 1+ Mys ST
			TALLAHASSEC, FLA 32301
	(b)	Enter name of <u>NEW Registered Agent</u> and/or	NEW Registered Office address:
	, ,	······································	Corporation Service Company PETER MURLAY
		NEW Registered Agent:	Corporation Service Company 12/2/2 Musicing
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hoya Street SSU PUTTER LAWE LONGBORT REY PLA
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hoya Street, SSU PUTTER LAWE LONGBOAT KEY PLA Tallahacese ,FL-32905 34228
anc	the	imited liability company is not organized under ned that after the change or changes are made, to have been softing of the registered agent will be	the laws of the State of Florida, it is hereby
anc lial the the	the pility me ope	imited liability company is not organized under ned that after the change or changes are made, to business office of the registered agent will be business of the limited liability company or as other agreement of the limited liability company. Multiple of the limited liability company.	the laws of the State of Florida, it is hereby the Florida street address of the registered office
anc lial the the	the pility me ope	imited liability company is not organized under ned that after the change or changes are made, to business office of the registered agent will be y company, it is hereby confirmed that the chan mbers of the limited liability company or as other training agreement of the limited liability company. The of a member or authorized representative of a member	the laws of the State of Florida, it is hereby the Florida street address of the registered office identical. Or, in the case of a Florida limited age(s) was/were authorized by an affirmative vote of herwise provided in the articles of organization or any.
anc liah the the	oility me ope	imited liability company is not organized under ned that after the change or changes are made, to business office of the registered agent will be y company, it is hereby confirmed that the changement of the limited liability company or as otherating agreement of the limited liability company or an athorized representative of a member PETER J. Mullay	the laws of the State of Florida, it is hereby the Florida street address of the registered office identical. Or, in the case of a Florida limited age(s) was/were authorized by an affirmative vote of herwise provided in the articles of organization or any.
and lial the the Sign	nature	imited liability company is not organized under ned that after the change or changes are made, to business office of the registered agent will be y company, it is hereby confirmed that the changements of the limited liability company or as other atting agreement of the limited liability company or as other atting agreement of the limited liability company or an authorized representative of a member of the limited liability company or typed name of signee	the laws of the State of Florida, it is hereby the Florida street address of the registered office identical. Or, in the case of a Florida limited age(s) was/were authorized by an affirmative vote of herwise provided in the articles of organization or any.

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 23, 2013

PETER MURRAY PUTTER ASSOCIATES, LLC 550 PUTTER LANE LONGBOAT KEY, FL 34228

SUBJECT: PUTTER ASSOCIATES, LLC

Ref. Number: L13000111159

We have received your document for PUTTER ASSOCIATES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Barbara Bostick Regulatory Specialist II

Letter Number: 813A00020189

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