

L13000141491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

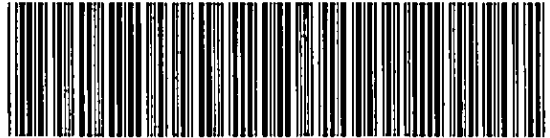
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SIMMONS  
APR 17 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Mayo GR Land, 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:

R. Scott Callen

\_\_\_\_\_  
Name of Person

Liles Gavin, P.A.

\_\_\_\_\_  
Firm/Company

2915 Kerry Forest Pkwy., Suite 101

\_\_\_\_\_  
Address

Tallahassee, FL 32309

\_\_\_\_\_  
City/State and Zip Code

scallen@lilesgavin.com

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

For further information concerning this matter, please call:

R. Scott Callen

at ( 850 ) 296-1951

\_\_\_\_\_  
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

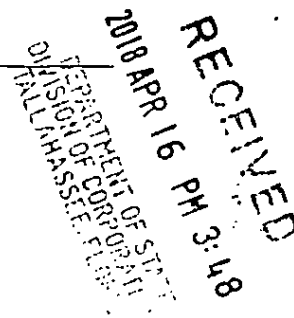
**MAILING ADDRESS:**

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: Mayo GR Land, LLC
2. (a) Mayo GR Land, LLC (b) Mayo GR Land, LLC  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)  
13720 Old St. Augustine Road, Suite 103 13720 Old St. Augustine Road, Suite 103  
Jacksonville, FL 32258 Jacksonville, FL 32258

3. 10/07/2013 4. L13000141491  
Date of filing/registration in Florida Document number

5. (a) Daniel Manusa  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
1701 Hermitage Blvd.  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
Suite 100  
Tallahassee, FL 32308

- (b) R. Scott Callen  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Liles Gavin, P.A.  
NEW Registered Office Address:  
2915 Kerry Forest Parkway, Suite 101  
Tallahassee, FL 32309

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.

James G. Bettinger  
Signature of a member or authorized representative of a member

James G. Bettinger

Printed or typed name of signer

*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.*

R. Scott Callen  
Signature of Registered Agent

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

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18 APR 16 PM 11:10  
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TALLAHASSEE, FLORIDA