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| (Re | questor's Name) | | | |
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| (Cit | ry/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Nar | ne) | | |
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| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer. | | | | |
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Office Use Only



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SECRETARY OF STATE
TAIL ANASSEE, PLORIDA

DEC 08 2015

S. YOUNG

COVER LETTER

| TO: Registration S Division of C | | | | |
|---|--|---------------------------------|--|--------------------|
| SUBJECT: ENCORE DEVELOPMENT Group, LLC Name of Limited Liability Company | | | | |
| Dear Sir or Madam: | | | | |
| The enclosed Register | red Agent/Registered Office | Change and fee(s |) are submitted for filin | g. |
| Please return all corre | espondence concerning this m | natter to the follow | wing: | 48 J |
| Edward | P- Flening Name of Person | | y | |
| McDonald | Firm/Company | head | | |
| 719 500 | th Palafox St. | | | ZS 5 |
| Pensacola, | Address FL 32502 | | | FILED BC-7 PH 4 |
| E-mail address: | development aroup. (to be used for future annual on concerning this matter, ple | report notification | epflening d | persacolalan.com |
| • | | _{at (} 850) | 696 - 7656 ea Code & Daytime Tel | ephone Number |
| Registration S Division of C Clifton Build | orporations ing ve Center Circle | Registra Divisior P.O. Bo | NG ADDRESS: ation Section of Corporations x 6327 ssee, Florida 32314 | |

□ \$55 Filing Fee & Certified Copy

\$25 Filing Fee

Enclosed is a check for the following amount:

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: | Development Group, LLC |
|---|---|
| 2. (a) 714. North Devilliers | (b) P.O. Box 12862 |
| Principal office address of limited liability company: | Mailing address of limited liability company: |
| (Note: MUST BE STREET ADDRESS) | (<u>Note: MAY BE POST OFFICE BOX</u>) |
| Pensacola, FL 32501 | Pensacola, FL 32591 |
| - | |
| 11 15 2013 | L13000160534 |
| 3. Date of filing/registration in Florida | 4. Document number |
| 5. (a) Amy Lee Fooladi | |
| Registered Agent and Registered Office shown on the records of the | ne Florida Dept. of State: |
| 8574 Bay River Road | *************************************** |
| Registered Office Address (MUST BE FLORIDA STREET A | DDRESS) 三名 |
| Navare, FL 32566 | —————————————————————————————————————— |
| , FL_ | |
| (b) Edward P. Fleming | FILED PASSES |
| Enter name of NEW Registered Agent and/or NEW Registered | |
| - | ラボ ラ |
| McDonald Floring Moorhead <u>NEW</u> Registered Office Address: 719 South Palafox St. | |
| NEW Registered Office Address: | |
| 119 South Palatox St. | |
| Pensacola, FL 32502, FL | |
| If the limited liability company is not organized under the law the change or changes are made, the Florida street address of a agent will be identical. Or, in the case of a Florida limited lial was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the leading to the operating agreement of the leading of a member or authorized representative of a member | the registered office and the business office of the registered bility company, it is hereby confirmed that the change(s) the limited liability company or as otherwise provided in |
| I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provided to merely reflect a change in the registered office address, I have notified in writing of this change. | e to act in this canacity. I further garee to comply with the |

Signature of Registered Agent