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DEC - 4 2014 T. CARTER SECRETARY OF STATE TALLAHASSEE, FLORIDA



COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Land Baron Name of	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:			
Prosen, Drew C. Name of Person			
Prosen Materials, LLC.			
1371 Saugrass Corporate Pluxy			
Sunrise, FL 33323 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Nicole Thomas at (954) 990-7329			
Name of Person STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Area Code & Daytime Telephone Number 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		

INHS18 (2/14)



October 16, 2014

DREW C. ROSEN ROSEN MATERIALS 1371 SAWGRASS CORPORATE PARKWAY SUNRISE, FL 33323 US

SUBJECT: LAND BARON JACKSONVILLE, LLC

Ref. Number: L13000163133

We have received your document for LAND BARON JACKSONVILLE, 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: 714A00022204

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: Land Baron Jacksoni	16, LLC
2. (a) 1371 Sawsyross Corporate Pluny (b) 1371 Sawsyross Corporate Pluny (c) 1371 Saws	
Sunrise, FL 33323 Junise, FL	. 33383
3. Date of filing/registration in Florida 4. Document no	3133 umber
5. (a) Post Drew C. Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 101 Fort Lauderdale Beach Blvd	-1 Fr
Registered Office Address (MUST BE FLORIDA STREET ADDRESS) #2803 Fort Lauderdale , FL 33316	ECRETARY OF ALLAHASSEE, FILED 4 NOV 20 PM
(b)Enter name of NEW Registered Agent and/or NEW Registered Office address: Place	F STATE FLORIDA
Fort Lawfrdaie, FL 33301	
If the limited liability company is not organized under the laws of the State of Florida, it is her the change or changes are made, the Florida street address of the registered office and the busi agent will be Mentical. Or, in the case of a Florida limited liability company, it is hereby conf was/were authorized by an affirmative vote of the members of the limited liability company or the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Printed or type	ness office of the registered irmed that the change(s) as otherwise provided in
I hereby accept the appointment as registered agent and agree to act in this capacity. I furthe provisions of all statutes relative to the proper and complete performance of my duties, and I the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if to merely reflect a change in the registered office address, I hereby confirm that the limited lice notified in writing of this change.	

Signature of Registered Agent