

L13000170879

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

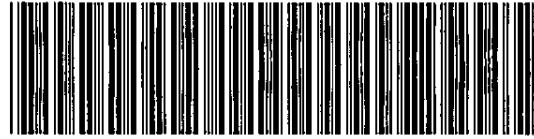
(Business Entity Name)

(Document Number)

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13 DEC 23 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 30 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Nurse shirt
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:

Daniel Hogue
Name of Person

Nurse shirt LLC
Firm/Company

10926 Country Ostrich Dr
Address

Pensacola, FL 32534
City/State and Zip Code

nurse shirt@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Hogue at (850) 890-8827
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 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.

1. Name of the limited liability company: Nursechirt LLC

2. (a) Principal office address of limited liability company: 10926 Country Ostrich Dr
(Note: MUST BE STREET ADDRESS) Pensacola, FL 32534

(b) Mailing address of limited liability company: 10926 Country Ostrich Dr
(Note: MAY BE POST OFFICE BOX) Pensacola, FL 32534

12-11-13
3. Date of filing/registration in Florida

L13000170979
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: United States Corporation Agents, Inc.

Registered Office Address: 13302 Windy Oak Court
A
Tampa, FL 33612

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: Daniel Hogue

NEW Registered Office Address: 10926 Country Ostrich Dr
(MUST BE FLORIDA STREET ADDRESS) Pensacola, FL 32534

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.

[Signature]
Signature of a member or authorized representative of a member

Daniel Hogue
Printed or typed name of signee

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 608, 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.

[Signature]
Signature of Registered Agent

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

12/27/2013 10:47:31 From: To: 8506176383

(2/4)

850-817-6511

12/27/2013 8:28:58 PM

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Fax System

M04000005400



December 27, 2013

FLORIDA DEPARTMENT OF STATE

Division of Corporations

BLACKSTONE FAMILY MEDIA III LLC
C/O BLACKSTONE MEDIA MANAGEMENT ASSOC. I
345 PARK AVENUE
NEW YORK, NY 10154

SUBJECT: BLACKSTONE FAMILY MEDIA III LLC
REF: M04000005400

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refile this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H13000282692
Letter Number: 213A00029135

RE-SUBMIT

Please retain original filing
date of submission 12/26

RECEIVED
13 DEC 27 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

J. Shivers DEC 30 2013