

L14000021365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

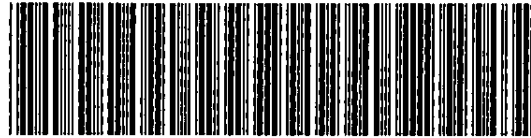
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600257778916

03/14/14--01003--015 **35.00

14 MAR 14 AM 10:27
SECRETARY OF STATE
TALLAHASSEE, FL 32310

APPROVED
AND
FILED

C. LEWIS
MAR 14 2014
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **Henry M LLC**

Name of Corporation

DOCUMENT NUMBER: **L14000021365**

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Henry Donaldson

Name of Contact Person

Henry M LLC

Firm/Company

PO Box 3034

Address

High Springs FL 32655

City/State and Zip Code

hmd7@msn.com

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

For further information concerning this matter, please call:

Henry Donaldson

Name of Contact Person

at **(863) 712-7207**

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**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: HENRY M LLC

2. (a) 22019 NW 190TH AVE (b) PO BOX 3034

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

HIGH SPRINGS, FL. 32643

HIGH SPRINGS, FL. 32655

8-13-13

L14000021365

3. Date of filing/registration in Florida

4. Document number

5. (a) HENRY DONALDSON

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2745 GRACE MANOR

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

LAKELAND, FL 33812

(b) HENRY DONALDSON

Enter name of NEW Registered Agent and/or NEW Registered Office address:

22019 NW 190TH AVE.

NEW Registered Office Address:

HIGH SPRINGS, FL 32643

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.

Henry M Donaldson

Signature of a member or authorized representative of a member

HENRY M DONALDSON

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 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.

Henry M Donaldson
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

APPROVED
AND
FILED
14 MAR 14 AM 10:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA