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COVER LETTER

TO: Registration Section Division of Corporations

Jevelopment LLC SUBJECT: thern flan 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:

Justin R.

Southern Atlantic Site Development LLC Firm/Company

Long Pond Address

ulee, FL 32097 City/State and Zip Code

Southern at lantic fl @ gmail. com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at (<u>904</u>) <u>556-4478</u> Area Code & Daytime Telephone Number Justin R. Name of Person

## **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

INHS18 (2/14)

## 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. N	1. Name of the limited liability company: Southern Atkartic Site 1	Development LLC
2. (a)	2. (a) 76073 Long Pond Loop (b) 76073	
		Idress of Timited liability company: <u>MAY BE POST OFFICE BOX</u> )
	Julee, FL 32097 Julee, F	1 32097
		068086
3.	3. Date of filing/registration in Florida 4. Docume	ent number
5. (2	5. (a) United States Corporation Agents, Inc. Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
	13302 Winding Oak Court Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	Α	
	Tampa ,FL 33612	۰ م
		2015 0
(b	(b) UUSHINK, HOWARCE Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :	
	76073 Long Pond Loup	A IO: E. FLOP
	NEW Registered Office Address:	ORICORIC
		A C
	Julee, FL 32097	
If the	If the limited liability company is not organized under the laws of the State of Florida, it	is hereby confirmed that after
the cl	the change or changes are made, the Florida street address of the registered office and the agent will be identical. Or, in the case of a Florida limited liability company, it is hereby	e business office of the registered
was/v	was/were authorized by an affirmative vote of the members of the limited liability compatible the articles of organization or the operating agreement of the limited liability company.	
uic a	the articles of organization of the operating agreement of the finite diability company.	1/2 mg
Sig	Signary of a member or authorized representative of a member Printed	Huber Q or typed name of signee
I her	I hereby accept the appointment as registered agent and agree to act in this capacity. I provisions of all statutes relative to the proper and complete performance of my duties a	further agree to comply with the and large to comply with the
the o to me	provisions of all statutes relative to the proper and complete performance of my duties, a the obligations of my position as registered agent as provided for in Chapter 605, F.S. ( to merely reflect a change in the registered office address, I hereby confirm that the limit	Dr, if this document is being filed ted liability company has been
notifi	notified in writing of this change.	
Signa	Signature of Registered Agent	

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