

L14000120839

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

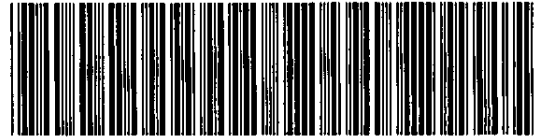
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600291937316

600291937316
11/04/16--01023--011 **35.00

2016 NOV 21 P 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

D. BRUCE
NOV 22 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 7, 2016

DAVID HEMMINGER
2754 KELLY BROOKE LANE
DEERFIELD BEACH, FL 33442

SUBJECT: 65 - 207 DEER CREEK, LLC
Ref. Number: L14000120839

We have received your document for 65 - 207 DEER CREEK, 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 registered agent must sign accepting the designation.

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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 616A00023839

2016 NOV 21 P 1: 06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 65-207 Deer Creek LLC
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:

David Hemminger
Name of Person

2754 Kelly Brooke Lane
Address

Deerfield Beach, FL 33442
City/State and Zip Code

dave@pbfarms.com
E-mail address: (to be used for future annual report notification)

2015 NOV 21 P 14:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

David Hemminger at (515) 707 0909
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 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: 65-207 Deer Creek LLC

2. (a) 2754 Kelly Brooke Lane (b) same
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) *(Note: MAY BE POST OFFICE BOX)*

3. 07/31/2014 4. L14000120839
Date of filing/registration in Florida Document number

5. (a) AC Double P Corporate Services, Inc
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
200 S. Andrews
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

Ft. Lauderdale, FL 33301

(b) David Hemminger
Enter name of NEW Registered Agent and/or NEW Registered Office address:
2754 Kelly Brooke Lane
NEW Registered Office Address:

Deerfield Beach, FL 33442

FILED
2016 NOV 21 P 4: 06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

David Hemminger
Signature of a member or authorized representative of a member

David Hemminger
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.

David Hemminger
Signature of Registered Agent