## L14000 183075

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PICK-UP	☐ WAIT	MAIL						
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(Document Number)								
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 3, 2016

E2B ASSOCIATES, LLC EDWARD BROWN 2339 EAGLE HARBOR PKWY FLEMING ISLAND, FL 32003

SUBJECT: E2B ASSOCIATES, LLC

Ref. Number: L14000183075

We have received your document for E2B ASSOCIATES, 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):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Letter Number: 516A00009183

Karen A Saly Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: E2B Associates, LLC

Name of Corporation

DOCUMENT NUMBER:

14000183075

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:

**Edward Brown** 

Name of Contact Person

E2B Associates, LLC

Firm/Company

2339 Eagle Harbor Parkway

Address

Fleming Island, FL 32003

City/State and Zip Code

edbrown@e2bassociates.com

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

For further information concerning this matter, please call:

**Edward Brown** 

,904

304-0360

Name of Contact Person

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.	Na	me of the limited liability company: E2B Associate	es, LLC	<u> </u>				
2	(a)	2339 Eagle Harbor Parkway	(b) 2339 Eagle Harbor Parkway					
	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Fleming Island, Fl 32003	<b></b>	Fleming	Island, FI 32003		<del></del>	
		November 26, 2014	<del></del>	L1400018	33075			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	CORPORATION SERVICES COMPANY						
		Registered Agent and Registered Office shown on the records of the	ne Florida	Dept. of State	r E			
		1201 HAYS STREET			_			
		Registered Office Address (MUST BE FLORIDA STREET A	<b>DDRESS</b>	2	•			
		TALLAHASSEE ,FL	32301		16 MAY SLURE I IAUL AHA			
	(b)	EDWARD BROWN			1888 1888	Y 12	E Proseducios By Examples If	
		Enter name of NEW Registered Agent and/or NEW Registered Office address:			3 3			
		2339 EAGLE HARBOR PARKWAY						
		NEW Registered Office Address:			A C	ω,		
		FLEMING ISLAND , FL	32003					
the ag	e cha ent v as/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regist bility confitted limited li	stered office ompany, it is nited liability	e and the business off s hereby confirmed the y company or as othe apany.	ice of the	the registered change(s)	
	Signat	ture of a member or authorized representative of a member			Printed or typed name of	l' signee	<del></del>	
pr the to	ovisi e obl mere tified	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	e to act perform for in ( ereby c	in this capa ance of my a Chapter 605, onfirm that t	acity. I further agree luties, and I am fami , F.S. Or, if this doc the limited liability c	to cor liar wi ument ompan	mply with the ith and accept is being filed y has been	
Si		re of Registered Agent						