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(Re	equestor's Name)					
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PICK-UP	WAIT	MAIL				
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Mills 50 Properties, LCC  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:
Sam Babbs III  Name of Person
Mills 50 Properties, LCC Firm/Company
629 N. Fern Creek Ave. Address
Orlando, FC. 32803 City/State and Zip Code
San @ Esquire Legal Group. Con E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
San Babbs III at (407) 999-0045  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
INHS18 (2/14)



## FLORIDA DEPARTMENT OF STATE Division of Corporations

ASTER AN 21 PH 4:21

December 15, 2015

SAM BABBS III 629 N FERN CREEK AVE ORLANDO, FL 32803 US

SUBJECT: MILLS 50 PROPERTIES, LLC

Ref. Number: L15000122173

We have received your document for MILLS 50 PROPERTIES, 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: 415A00026198

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

## 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. Nam	e of the limited liability company: Mills 5	O Prope	rties, LL	$\subset$		
<u> </u>	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  629 N. Fern Creek Ave.  Oslando, FC. 32803  7/16/2015	629 Orlan	Mailing address of limite  (Note: MAY BE POS  N. Fern  Lo, FC. 3	TOFFICE Craek 288	BOX)	ve.
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	Document number	<u> </u>	-	
	egistered Agent and Registered Office shown on the records of the F					
R	Registered Office Address (MUST BE FLORIDA STREET ADD		-			
_	801 N. Magnolia Ave., Orlando ,FL	Suite 40	5-			
	Orlando , FL	32803	_	S.		
_	Sam Babbs III  nter name of NEW Registered Agent and/or NEW Registered Offi  629 N. Fern Creek Au  NEW Registered Office Address:	ice address;	-		6 JAN 24 PM 3:	A Section of the Contraction of
	registered office reduces.			## ##	84:	w <sub>4.14</sub> 1
_			-	5	00	
_	Orlando, FL	32803	-			
the chang agent wil was/were	nited liability company is not organized under the laws of or changes are made, the Florida street address of the libe identical. Or, in the case of a Florida limited liabile authorized by an affirmative vote of the members of the so of organization or the operating agreement of the lim	registered office ity company, it is le limited liability ited liability com	e and the business of s hereby confirmed by y company or as oth apany.	ffice of the that the clerwise pr	ie regi: hange(	stered (s)
Signatur	e of a member or authorized representative of a member	Gregory	Printed or typed name	of signee	_	
I hereby	accept the appointment as registered agent and agree t as of all statutes relative to the proper and complete per ations of my position as registered agent as provided fo reflect a change in the registered office address, I here n writing of this change.	to act in this cape formance of my o or in Chapter 605 eby confirm that	acity. I further agreduties, and I am fam for F.S. Or, if this do the limited liability of	e to comp niliar with cument is company	oly wit and d being has be	h the sccept filed en
Signature	of Registered Agent					