L15000 127270

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nar	me)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
		į			





200287426562

07/05/16--01007--028 **25.00

TALLAHASSEE FLORIDA

JUL 0 6 **2016**S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations	•
111 GEMS LLC	
	ted Liability Company
Dear Sir or Madam:	•
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
MELISSA SINTON/GALL	
Name of Person	,
111 GEMS LLC	
Firm/Company	
5319 SE MITCHELL LN.	
Address	
STUART, FL 34997	
City/State and Zip Code	
OCEANSIDE.CONSTRUCTION.LLC@GMAIL.	СОМ
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	dl:
MELISSA SINTON/GALL 777	2 631-8971
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	
2 \$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. Na	ame of the limited liability company:	.LC				
2. (a)		(b)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	7006 SW WOODBINE WAY		7006 SW WOODBINE WAY			
	PALM CITY FL 34990		PALM C	ITY FL 34990		
	4/18/2016		L1500012	· 27270		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	BRENT K. DUBOIS					
J. (a)	Registered Agent and Registered Office shown on the records of	f the Florie	la Dept. of State	 e:		
					<u>د</u> ب	IAI IS
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>:S)</u>	-	ا ا	<u> </u>
	7006 SW WOODBINE WAY				JUL .	357
	PALM CITY .FI	34990).	- • • • • • •	-5	23.55 25.55 1.55 1.55 1.55 1.55 1.55 1.55
	ALTERIOR CALIFORNICAL		-		PM 4:	11 US
(b)	MELISSA SINTON/GALL				្ត	器三
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office a	ddress:		သ	5 .
	MINUD			-		•
	NEW Registered Office Address:					
	5319 SE MITCHELL LN	 -		-		
	STUART , F	L 34997	,	· · · · ·		
the cha agent v was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ture of a member or authorized representative of a member	of the reg liability of of the li- e limited	istered office company, it i mited liabilit	e and the business offices offices of the series of the se	ce of the at the cha wise pro	registered ange(s)
I here provisi the obl to mero notified	by accept the appointment as registered agent and agents of all statutes relative to the proper and completing its agent as providing the reflect a change in the registered agent as providely reflect a change in the registered office address, I din writing of this change.	gree to a e perfori ed for in I hereby	ct in this cap nance of my Chapter 602 confirm that	• •	-	ly with the and accept being filed as been
Signatu	re of Registered Agent					