L1500167086

(Requestor's Name)							
(Address)							
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(Address)							
. (City/State/Zip/Phone #)							
, , , , ,							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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10/30/15--01028--014 **25.00



COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations		t a				
SUBJ	FLORIDA HOME TOWN BUILDERS LLC						
0020	Name of Limited Liability Company						
Dear S	Sir or Madam:						
The er	nclosed Registered Agent/Registered Offic	e Change and fee	e(s) are submitted for filing.				
Please	return all correspondence concerning this	matter to the fol	lowing:				
JESS	SICA DAY						
	Name of Person						
FLORIDA HOME TOWN BUILDERS LLC							
	Firm/Company	· · · · · · · · · · · · · · · · · · ·					
7512	DR PHILLIPS BLVD STE 50-104						
	Address						
ORL	ANDO FL 32819						
	City/State and Zip Code		•				
JTR	765@AOL.COM						
1	E-mail address: (to be used for future annu	al report notifica	tion)				
For fu	rther information concerning this matter, p	lease call:					
JESS	SICA DAY	407	808-5665				
	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	Regis Divis P.O. 1	tration Section ion of Corporations Box 6327 hassee, Florida 32314				
Enclosed is a check for the following amount:							
	☑ \$25 Filing Fee	\$ 55	□ \$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. Na	me of the limited liability company: FLORIDA HOI	ME TC	WN BUIL	DERS LLC		
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)				
	7512 DR PHILLIPS BLVD STE 50-104		7512 DR	PHILLIPS BLVD	STE 50-104	
	ORLANDO FL 32819	_	ORLANDO FL 32819			
-	10/01/2015		L1500016	67086		
3: 5. (a)	Date of filing/registration in Florida DÁVID PROFENNO	4.		Document number		
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	Registered Office Address (MUST BE FLORIDA STREET A. 7512 DR PHILLIPS BLVD STE 50-104				SECTION OF	
	ORLANDO , FL	FL		· ·	1 30	
(b)	JESSICA DAY					
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				ORDE	
			í		V	
	NEW Registered Office Address:				•	
	, FL_			-		
the cha agent v was/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of clear of organization or the operating agreement of the least of the limited liable.	the regi: bility co f the lim	stered office ompany, it is sited liability	e and the business off s hereby confirmed the y company or as othe	ice of the registered nat the change(s)	
1/	Jerrica D	JES	SSICA DA		P - ()	
	fury of a member or authorized representative of a member	an to se	t in this can	Printed or typed name of		
provisi the obl to mer	by accept the appointment as registered agent and agra ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I h it in writing of this change.	nertorm	ance of my	duties and Lam lami	har with and accept -	
<u>/</u> Signatu	JUSTICE TO Registered Agent	٠				