

600411921586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

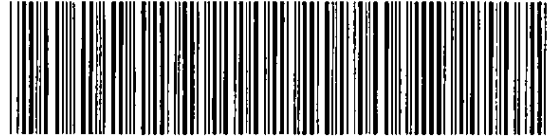
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07/17/23--01030--015 \*\*25.00

2023 JUL 17 PM 10:21  
CLERK OF STATE  
TALLAHASSEE, FL

R. HUNT  
07/17/23

**SUBJECT:** Cox Enterprises, LLC

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The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Thomas Cox

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\_\_\_\_\_

250 Palm Coast Pkwy, Ste 607-501

Age Group	Percentage
18-24	10%
25-34	15%
35-44	20%
45-54	25%
55-64	30%
65-74	35%
75-84	40%
85+	45%

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cox.joann@gmail.com

For further information concerning this matter, please call:

992-6631

[illegible]

Area Code &amp; Daytime Telephone Number

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**☐ \$25 Filing Fee**

☐ \$55 Filing Fee & Certified Copy

7-23D  
17 PHIO:22  
OFFICE OF STATE  
CLERK, FLORIDA

**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: Cox Enterprises, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

38 Hernandez Avenue

Palm Coast, FL 32137

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

250 Palm Coast Pkwy NE Ste 607-501

Palm Coast, FL 32137-8225

August 2, 2016

116000142430

3. Date of filing/registration in Florida

4. Document number

5. (a) \_\_\_\_\_  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Thomas Cox

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

46 Old Oak Drive South

Palm Coast, FL 32137-14324

(b) \_\_\_\_\_  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Pamela B Hathaway

**NEW Registered Office Address:**

38 Hernandez Avenue

Palm Coast, FL 32137-3243

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.

Thomas Cox  
Signature of a member or authorized representative of a member

Thomas Cox, Managing Member

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.

Pamela B Hathaway  
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00