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(Requestor's Name)

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(City/State/Zip/Phone #)

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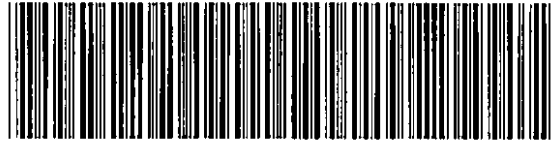
(Business Entity Name)

(Document Number)

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2020 APR 17 AM 10:28

CLERK OF SUPERIOR COURT
DIVISION OF CORPORATIONS
& BUSINESS REGISTRATION

APR 21 2020
S. YOUNG



2020 MAR 17 PM 4:56

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 7, 2020

ROBERT JUSTIN GORMAN
RJ GORMAN CONTRACTING LLC
1944 FRANKFORD AVENUE
PANAMA CITY, FL 32405

SUBJECT: RJ GORMAN CONTRACTING, LLC
Ref. Number: L16000187827

We have received your document for RJ GORMAN CONTRACTING, 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):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 420A00005060

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RJ GORMAN CONTRACTING, LLC
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:

Robert Justin GORMAN
Name of Person

RJ Gorman Contracting, LLC
Firm/Company

1944 Frankford Ave
Address

Panama City FL 32405
City/State and Zip Code

justin@rjgormanmarine.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Justin Gorman at (850) 527-2601
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$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. Name of the limited liability company: RS Gorman Contracting LLC
2. (a) 1944 Frankford Ave Panama City FL (b) Same
Principal office address of limited liability company: 32405 Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 10-11-16 Date of filing/registration in Florida 4. L16000187827 Document number

5. (a) United States Corporation Agents Inc.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

13302 Winery Oak Court A Tampa FL 33612
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

_____, FL _____

- (b) Robert Justin Gorman
Enter name of NEW Registered Agent and/or NEW Registered Office address:

1944 Frankford Ave Panama City FL
NEW Registered Office Address: 32405

_____, FL _____

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.

Signature of a member or authorized representative of a member

Robert Justin Gorman
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.

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

FILED
2020 APR 17 AM 10:28
DIVISION OF CORPORATIONS
TALLAHASSEE, FL