L16000 232603

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(City/State/Zip/Phone #)						
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(Document Number)						
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COVER LETTER

TO:	Registration Section Division of Corporations		;					
SUBJI	Gulf Coast Modular Homes, LLC							
5020		ne of Limited L	iability Company					
Dear S	ir or Madam:							
The en	closed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.					
Please	Please return all correspondence concerning this matter to the following:							
Lawre	ence L. Kill							
	Name of Person							
	Firm/Company		_					
383 0	George Rd., PO Box 298							
	Address							
Hebro	on, NH 03241							
	City/State and Zip Code							
llkill20	004@gmail.com							
E	-mail address: (to be used for future and	ual report noti	fication)					
For fur	ther information concerning this matter	, please call:						
Lawre	ence Kill	603	369-2948					
	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	3 (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. N	ame of the limited liability company: Gulf Shores	Modular	Homes, LLC			
2. (a)	Gulf Shores Modular Homes, LLC	(b)	Gulf Shores Mod	ular Homes, LLC		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(9)	_	ess of limited liability company: (Y BE POST OFFICE BOX)		
	1559 West Euclid Avenue		1545 Gulf Shores	Parkway #306		
	Deland, FL 32720		Gulf Shores, AL 3	36542		
	January 1, 2017	L	.16000232603			
3. 5. (a	Date of filing/registration in Florida Robert N. Golin	4.	Document	t number		
J. (u	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	Registered Office Address (MUST BE FLORIDA STREE) 1559 West Euclid Avenue	T ADDRESS)		17 F SECA		
	Deland	_L 32720				
(b)	Lorri Carmel Golin Enter name of NEW Registered Agent and/or NEW Registered Office address:			W 7. 45 SPE. FLORID.		
	NEW Registered Office Address:			-		
						
•	·	FL		•		
the ch agent was/w	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the memberaticles of organization or the operating agreement of the control of the con	of the regist liability cons of the limit he limited lia	ered office and the brompany, it is hereby conted liability company ability company.	usiness office of the registered onfirmed that the change(s)		
Sign	ature of a member or authorized representative of a member	Lawi	rence L Kill	yped name of signee		
I here provis the ob to me	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple ligations of my position as registered agent as provid- rely reflect a change in the registered office address, and in writing of this change.	gree to act i te performa led for in Ci I hereby coi	in this canacity. I fur	ther agree to comply with the		

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

Signature of Registered Agent

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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2.	(a)	Gulf Shores Modular Homes, LLC		(b)	Gulf Shores Modular Homes, LLC
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	·····	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		1559 West Euclid Avenue			1545 Gulf Shores Parkway #306
		Deland, FL 32720	_		Gulf Shores, AL 36542
		January 1, 2017		L	L16000232603
3.	<i>(</i>)	Date of filing/registration in Florida Robert N. Golin	4.	_	Document number
5.	(a)	Registered Agent and Registered Office shown on the records of	the Florid	da I	Dept. of State:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1559 West Euclid Avenue		<u> </u>	
		Deland , FL	32720)	
(b)		Lorri Carmel Golin Enter name of NEW Registered Agent and/or NEW Registered	lress:		
		NEW Registered Office Address:	<u></u>	<u>.</u>	
			,		
age wa	ena ent w s/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited li- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reg ability of of the lin	ust con mit	mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
à		urrena L Kill	La	WI	rence L Kill
	-	ure of a member or authorized representative of a member			Printed or typed name of signee
the to i	visi obli nere	by accept the appointment as registered agent and agrons of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I it is writing of this change.	ee to ac perforn d for in hereby (ct i na: Ci coi	in this capacity. I further agree to comply with the ince of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed infirm that the limited liability company has been

Signature of Registered Agent