117000017014

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

Office Use Only



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03/16/17--01004--020 **25.00

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2017 MAR 28 PM 2: 0.9

March 17, 2017

ROBERT COLE 2336 MARSH LANDING CT FLEMING ISLAND, FL 32003

SUBJECT: REAL ESTATE WEB DESIGN BY BOB, LLC

Ref. Number: L17000017014

We have received your document for REAL ESTATE WEB DESIGN BY BOB, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6051.

Octavia I Simmons Regulatory Specialist II

Letter Number: 017A00005181

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: Real ESTATE Web Dosigu by Bob, 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 Cole Name of Person						
REAL ESTATE WEB Designby Bob Firm/Company						
2336 MArsh LANding et. Address						
Fleming Island FC 32003 City/State and Zip Code						
BobCole/09@9mail.Com E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Robert Cole at (904) 710-0611 Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: MAILING ADDRESS:						
Registration Section Registration Section						
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327						
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301						
Enclosed is a check for the following amount:						
□ \$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. Name	of the limited liability company: $ {\cal R}{\it EAL} {\it E5} $	TATE WEB	DESIGN BU	BOB,	LC
2. (a)			SAME		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u> </u>	Mailing address of limited l		
_ /	2336 MAYSH LANDING CT	<u> </u>			
_7	FLEMING ISLAND, FL 32003				
3.	1/23/2017 Date of filing/registration in Florida	4.	70000170 Document number	14	
5. (a)	Cole, LAURENE stered Agent and Registered Office shown on the records of the	Florida Dent of State			
		·· -			
	istered Office Address (MUST BE FLORIDA STREET AD	<u>DDRESS)</u>			
	2336 MAYSH LANding CT			· .	
	Fleming Island, FL	32003			S.W.P.
(b)				35	i i
	r name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	ffice address:		23	i ke satisharin D
	Registered Office Address:			PH 2:	
	i.			20	
	2336 MArsh LANgins	et			
7	-leming Island ,FL	32003			
If the limite the change agent will b was/were as	ed liability company is not organized under the laws or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited liabuthorized by an affirmative vote of the members of of organization or the operating agreement of the limited liabuthorized.	ne registered office ility company, it is the limited liability	and the business office thereby confirmed that the company or as otherward	ce of the reg at the change	istered e(s)
Signatura	f a member or authorized representative of a member	Rob	Printed or typed name of s	1000	
I hereby ac provisions o the obligati to merely re	scept the appointment as registered agent and agree of all statutes relative to the proper and complete peons of my position as registered agent as provided peoleci a change in the registered office address, I he writing of this change.				ith the accept g filed seen

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

Signature of Registered Agent