

L17000042068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

2018 MAY -7 P 2:57

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5/9/18



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 14, 2018

C. MICHELLE GRIFFIN  
237 EDENWYLDE CT  
HAMPTON, GA 30228

SUBJECT: ISLAND TIME REALTY, LLC  
Ref. Number: L17000042068

We have received your document for ISLAND TIME REALTY, 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 suite # on 5b is unclear, please revise.

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.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 618A00005169

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TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Island Time Realty, 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:

Michelle Griffin

Name of Person

Island Time Realty, LLC

Firm/Company

237 Edenwyld Court

Address

Hampton, GA 30228

City/State and Zip Code

michelle@michellegriffin.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Griffin

Name of Person

678

at ( )

467-0788

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

OFFICE OF STATE  
TALLAHASSEE, FLORIDA

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**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: Island Time Realty, LLC

2. (a) Island Time Realty, LLC (b) Island Time Realty, LLC

Principal office address of limited liability company:

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

237 Edenwylde Court

Hampton, GA 30228

Mailing address of limited liability company:

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

237 Edenwylde Court

Hampton, GA 30228

3/21/18

618A00005169

3. Date of filing/registration in Florida

4. Document number

5. (a) Christa M. Griffin

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Island Time Realty, LLC

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

7476 Sunset Harbor Drive, # 422

Navarre Beach, FL 32566

(b) Brian O'Neal

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Island Time Realty, LLC

**NEW Registered Office Address:**

7453 Sunset Harbor Drive, #1-112

Navarre Beach, FL 32566

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.

C. Michelle Griffin

Signature of a member or authorized representative of a member

C. Michelle Griffin

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.*

Brian O'Neal

Signature of Registered Agent

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

**FILING FEE: \$25.00**