L17000049390

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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
PIER PARK CROSSING SUBJECT:	SLLC
	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	g this matter to the following:
Stephen Coleman	
Name of Person	
Pier Park Crossings LLC	
Firm/Company	
2740 Zelda Road, Suite 3A	
Address	
Montgomery, Alabama 36106	
City/State and Zip Cod	ë
steve@homecorpinc.com	
E-mail address: (to be used for future	annual report notification)
For further information concerning this matt	ter, please call:
Stephen Coleman	334 819-7707
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	ing 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.

(a)	2740 Zelda Road, Suite 3A		(b) 2740	Zelda Road, Suite 3A
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	·······		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Montgomery, Alabama 36106		Montg	gomery, Alabama 36106
	March 02, 2017		L17000	0049390
(a)	Date of filing/registration in Florida Carmen Worley	4,		Document number
(4)	Registered Agent and Registered Office shown on the records o 9100 Baldridge Drive	f the Flori	da Dept. of	State:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u>SS)</u>	
	Pensacola , F	3251	4	
	Bay Parkway Multi-Family, LLC			$\bar{\omega}$
(0)	Enter name of NEW Registered Agent and/or NEW Registere	d Office	ddress:	
	c/o The St. Joe Company			. 23
	NEW Registered Office Address:			<u> </u>
	133 South WaterSound Parkway			
	WaterSound	3246	 	
e char ent w as/we	mited liability company is not organized under the la nge or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited by the authorized by an affirmative vote of the members closs of organization or the operating agreement of the	f the reginability of the li	istered of company, mited liab liability o	lice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in company.
	Soly A Challen	St	ephen C	
	ure of a mainber or <u>authorized representative</u> of a member			Printed or typed name of signee
nereb ovisid e oblij	oy accept the appointment as registered agent and agons of all statutes relative to the proper and complete gations of my position as registered agent as providely reflect a change in the registered office address. I	ree to a perfori d for in	et in this c nance of n Chapter to	apacity. I further agree to comply with the ny duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed but the limited liability company, her files

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

egistered Agent