

L17 000193841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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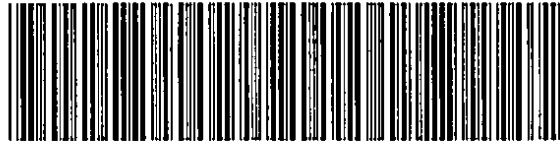
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations.

**SUBJECT:** Robin Thrush, 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:

Laurie J. Bartlett

\_\_\_\_\_  
Name of Person

Robin Thrush, LLC

\_\_\_\_\_  
Firm/Company

1824 Lewis Turner BLVD

\_\_\_\_\_  
Address

Fort Walton Beach Florida 3247

\_\_\_\_\_  
City/State and Zip Code

lauriejbartlett@gmail.com

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

For further information concerning this matter, please call:

aurie bartlett

850- 737-7085  
at ( )

\_\_\_\_\_  
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: Robin Thrush, LLC

2. (a) 1824 Lewis Turner Blvd  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
Fort Walton Beach  
Florida 32547  
September 18, 2017

(b) 1824 Lewis Turner Blvd  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
Fort Walton Beach  
Florida 32547  
82-2843302

3. Date of filing/registration in Florida 4. Document number

5. (a) Paracorp Incorporated  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
155 Office Plaza Dr  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
1ST  
Tallahassee, FL 32301

(b)  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
Laurie Bartlett  
NEW Registered Office Address:  
1824 Lewis Turner Blvd  
Fort Walton Beach, FL 32547

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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

Laurie Bartlett  
Printed or typed name of signee

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 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