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(Requestor's Name)				
(Address)				
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(-,				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
				
Special Instructions to Filing Officer:				
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SEP - 1 2023				
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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	ARCHER CONSTRUCTION LL	.C			
SCIPAL	Name of Limited Liability Company				
Dear Si	r or Madam:				
The enc	closed Registered Agent/Registered (Office Change and f	ce(s) are submitted for filing.		
Please r	return all correspondence concerning	this matter to the fo	ollowing:		
Susan R	lushing				
	Name of Person		_		
Rushing	g Law Firm, PLLC				
	Firm/Company		_		
3124 W	est County Highway 30A				
	Address		_		
Santa R	osa Beach, FL 32459				
	City/State and Zip Code	5	_		
susan@	rushinglaw30a.com				
E-	mail address: (to be used for future a	innual report notific	ation)		
For furt	her information concerning this matt	er, please call:			
Susan R	ushing	850 at (534-0123		
	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 followi	ng amount:			
	■ \$25 Filing Fee □ \$55		5 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.

l. Na	ame of the limited liability company: ARCHER CON	STRUCTION LLC			
2. (a)	200 HOWARD JONES ROAD	(b) 200 HO	(b) 200 HOWARD JONES ROAD		
2. (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	DEFUNIAK SPRINGS, FL 32433	DEFUNIAK SPRINGS, FL 32433			
	09/22/2017	1.1700019	7186		
3.	Date of filing/registration in Florida	— _{4.} ———	Document number		
5. (a)	Rushing Law Firm, PLLC				
	Registered Agent and Registered Office shown on the records o	, , , , , , , , , , , , , , , , , , ,	ate:		
	Registered Office Address (MUST BE FLORIDA STREET	<u>"ADDRESS)</u>			
	1394 COUNTY HIGHWAY 283 S. BLDG. 1		_		
	Santa Rosa Beach	32459 L			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> NEW Registered Office Address: 3124 West County Highway 30A		FIL 23 AUG 11		
	Santa Rosa Beach, F	L_32459	TLED ARROLD SEEFFLORIDA		
change agent v was/we	imited liability company is not organized under the la or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registered office a iability company, it of the limited liabil	lorida, it is hereby confirmed that after the nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in		
Signat	ture of a member or authorized representative of a member		Printed or typed name of signee		
provisi the obl to mere	by accept the appointment as registered agent and agens 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. It in writing of this change.	ree to act in this ca e performance of my ed for in Chapter 60 hereby confirm tha	pacity. I further agree to comply with t eduties, and I am familiar with and acc 15, F.S. Or, if this document is being fi t the limited liability company has beer		
Signatu	re of Registered Agent Division of Corporations • P.O.	Box 6327€ Tallab	assec. FL 32314		

FILING FEE: \$25.00