

L18000095108

Division of Corporations

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC REGISTERED AGENT CHANGE BIRCHWOOD LIVING, LLC

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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: Birchwood Living, LLC

2. (a) 11403 POSTON RD (b) 1944 CHANCELLOR RIDGE RD
 Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) *(Note: MAY BE POST OFFICE BOX)*
PANAMA CITY, FL 32404 PRATTVILLE, AL 36066

3. 04/16/2018 4. L18000095108
 Date of filing/registration in Florida Document number

5. (a) BARKSDALE, WILLIAM S, IV
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

11403 POSTON RD
 Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
PANAMA CITY, FL 32404

(b) Registered Agents Inc.
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

3030 N. Rocky Point Dr.
STE 150A
Tampa, FL 33607

2018 AUG - 7 PM 1:17
 STATE OF FLORIDA
 DIVISION OF CORPORATIONS

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.

Riley Park Riley Park
 Signature of a member or authorized representative of a member 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.

Bill Havre Bill Havre -President
 Signature of Registered Agent