

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 : BARKER WILLIAMS, PLLC
Account Number : I20170000030
Phone : (850)308-7033
Fax Number : (850)308-7115

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

Email Address: pwmurphy79@gmail.com

**LLC REGISTERED AGENT CHANGE
AP MURPHY LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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Corporate Filing Menu

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AP Murphy, 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:

Farrar J. Barker

Name of Person

Barker Williams, PLLC

Firm/Company

60 Clayton Lane

Address

Santa Rosa Beach, Florida 32459

City/State and Zip Code

pwmurphy79@gmail.com

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

For further information concerning this matter, please call:

Farrar J. Barker

850
at ()

308-7784

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: AP Murphy LLC

2. (a) Principal office address of limited liability company.
(Note: MUST BE STREET ADDRESS)

180 Clarton Drive

Inlet Beach, Florida 32461

(b) Mailing address of limited liability company.
(Note: MAY BE POST OFFICE BOX)

865 Basswood Lane

Frankfort, IL 60423

03/10/2021

L21000115748

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State
William E. Wyrrough Jr.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

30 South Shore Drive

Miramar Beach, FL 32550

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address

Barker Williams, PLLC

NEW Registered Office Address

60 Clayton Lane

Santa Rosa Beach, FL 32459

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.

Patrick Murphy
Signature of a member or authorized representative of a member

Patrick Murphy, Authorized Member

Printed or typed name of signer

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.

Farmer J. Fowler
Signature of Registered Agent