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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)	—			
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Special Instructions to Filing Officer:				
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COVER LETTER

TO: Registration Section Division of Corporations	
12894 158th CT N. LLC SUBJECT:	
	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Robert Munton	
Name of Person	
Firm/Company	
7366 Millbrook Avenue	
Address	
Melbourne, FL 32940	
City/State and Zip Code	
rmunton@prodigy.net	
E-mail address: (to be used for future annua	al report notification)
For further information concerning this matter, p	lease call:
Robert Munton	at ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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 a	mount:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	



2101 Waverly Place, Suite 100 Melbourne, FL 32901 whitebirdlaw.com

December 4, 2023

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Estate of James R. Hurlock, Jr.

Case No. 50-2023-CP-004773-XXXA-MB

To Whom It May Concern:

Please be advised this office represents Robert Munton as Personal Representative of the Estate of James R. Hurlock, Jr. ("decedent"), which is pending in the circuit court of Palm Beach County, Florida. Enclosed for your records are copies of the Death Certificate and Letters of Administration.

The decedent was the sole member, manager, and registered agent of two (2) Florida limited liability companies, the names and document numbers of which are listed below.

- 12894 158th CT N, LLC, Document No. L21000527916
- JRH Investment & Design, LLC, Document No. L21000532663

Please find enclosed two (2) Statements of Change of Registered Office or Registered Agent or Both for Limited Liability Company, and two (2) checks in the amount of \$25.00 each for payment of the filing fees. Please process the enclosed forms at your earliest convenience.

If you have any questions regarding any of the foregoing matters, please feel free to contact this office at (321) 327-5580 or asoto@whitebirdlaw.com.

Very truly yours, WHITEBIRD PLLC

Abigail C. Soto, FRP

Florida Registered Paralegal

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.

I. Na	ane of the limited liability company: 12894 158th CT N	, LLC		
2. (a)	16383-134th Terrace N., Jupiter, FL 33478	(b) 16383 134th Terrace N., Jupiter, FL 33478		
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (",	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	12/15/2021	 !	1.21000527916	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	James R. Hurlock, Jr.			
	Registered Agent and Registered Office shown on the records of the Registered Office Address (MUST BE FLORIDA STREET A 16383-134th Terrace N.		<u> </u>	
	Jupiter . FL_	33478	2023	
(b)	Robert Munton		2023 DEC -6 PI	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office add	SEE. FLORI	
	NEW Registered Office Address:		FLORID	
	7366 Millbrook Avenue		- Dri - P	
	Melbourne ,FL	32940		
thange igent w was/we	mited liability company is not organized under the law, or changes are made, the Florida street address of the rould be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liable of the	egistered oility con `the limit imited lia	d office and the business office of the registered impany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in	
Signat	ure of a member or authorized representative of a member		Printed or typed name of signee	
provision he obli o mere notified	by accept the appointment as registered agent and agre ons of all statules relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. I have tin writing of this change	e to act is performan for in Ch reby con	in this capacity. I further agree to comply with the nice of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed infirm that the limited liability company has been	