

Florida Department of State

Division of Corporations
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ECRETARY OF STATE

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## REGISTERED AGENT CHANGE

RESORTQUEST SOUTHWEST FLORIDA, LLC

 Certificate of Status
 0

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 Estimated Charge
 \$25.00

A. LUNT

EXAM

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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 608.416 or 608.508, 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.	Na	me of the limited liability company: ResortQuest Sou	Jihwest Florida, LLC	
		Principal office address of limited liability company (Nate: MUST BE STREET ADDRESS)		0 13
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	546 MARY ESTHER CUTOFF, STE. 3 FORT WALTON BEACH FL. 32548	0
6/	22/2	001	M01000001420	
3.	Da	e of filing/registration in Florida	4. Document number	200
5.	(a)	Registered Agent and Registered Office shown on t		700 <b>9 Ma</b> y
		Registered Agent:	CORPORATION SERVICE COMPANY SERVICE COMPANY	8
		Registered Office Address:	TALLAHASSEE FL 32301-2525 US	A 6
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Re</u>			DATE:	는 급
		NEW Registered Agent:	C T Corporation System	
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island Road	
II.	the l	imited liability company is not organized under the l ter the change or changes are made, the Florida stree	Plantation 2, FL 33324  aws of the State of Florida, it is hereby confirm address of the registered of figurand the business.	ned
of he lia	lice reby bilit	of the registered agent will be identical. Or, in the car confirmed that the change(s) was/were authorized by y company or as otherwise provided in the articles of liability company.	ase of a Florida limited liability company, it is by an affirmative vote of the members of the lir	nited
(Si	ຊະເສໄນ	e of a member or authorized representative of a member)	- -	
	n Lip inted	ght or typed name of signess)	-	
co an F. co By:	here mply Jan S nfipi	by accept the appointment as registered agent and a with the provisions of all statutes relative to the provision with and accept the obligations of my position or, if this document is being filed to merely reflect a company has been notified to the limited liability company has been notified to the limited liability company has been notified.	gree to act in this capacity. I further agree to oper and complete performance of my duties, a as registered agent as provided for in Chapter hange in the registered office address, I hereb in writing of this change.	and I r 608, vy
(S)	gnatu	re of Registered Agent)		
A	ssisi	an G wate ant Secretary Division of Corporations, P.O. Box FILING FEE:	: \$25.00	

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