

MO3000000140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

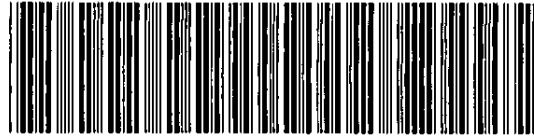
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300300880223

FILED

2017 JUL 10 AM 8:37

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

2017 JUL 10 PM 1:41

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

JUL 11 2017  
J. HARRIS

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 715400 8092315

AUTHORIZATION

COST LIMIT : \$ 25.00

*Signatures*

ORDER DATE : July 10, 2017

ORDER TIME : 10:31 AM

ORDER NO. : 715400-010

CUSTOMER NO: 8092315

CHANGE OF AGENT

NAME: LAWSON REALTY, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender

EXAMINER'S INITIALS: \_\_\_\_\_

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Lawson Realty, 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:

Robert Field  
Name of Person

Lawson Realty, LLC  
Firm/Company

241 Brodley Place  
Address

Palm Beach, FL 33480  
City/State and Zip Code

RJField@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Field at ( 561 ) 459-2770  
Name of Person Area Code & Daytime Telephone Number  
~~983-6945~~

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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: LAWSON REALTY, LLC

2. (a) _____ Principal office address of limited liability company: (Note: <u>MUST BE STREET ADDRESS</u> )  <u>11450 SE Dixie Hwy, Ste 105</u>  <u>HOBE SOUND, FL 33455</u>	(b) _____ Mailing address of limited liability company: (Note: <u>MAY BE POST OFFICE BOX</u> )  <u>11450 SE Dixie Hwy, Ste 105</u>  <u>HOBE SOUND, FL 33455</u>
---	---

3. <u>01/14/2003</u> Date of filing/registration in Florida	4. <u>M03000000140</u> Document number
--	---

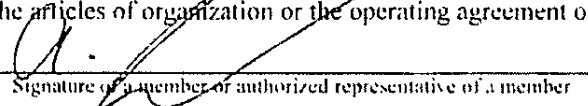
5. (a) UNITED CORPORATE SERVICES, INC.  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
9200 SOUTH DADELAND BLVD., SUITE 508  
MIAMI, FL 33156

(b) Corporation Service Company  
 Enter name of NEW Registered Agent and/or NEW Registered Office address:  
  
1201 Hays Street  
NEW Registered Office Address:  
  
Tallahassee, FL 32301

FILED  
 2017 JUL 10 AM 8:38  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

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.

 _____ Signature of a member or authorized representative of a member	<u>Adam Salvador</u> _____ 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.*

 _____ Signature of Registered Agent Corporation Service Company	BY: <u>Melissa Zender</u> <u>Asst. Vice President</u>
---	--

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
 FILING FEE: \$25.00