M0300001482

(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:		
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T. HAMPTON

MAY - 7 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Florida C	Commercial Properties, LLC	
	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	g this matter to the following:	
Penny Boynton		
Name of Person		
MAJORS Management, LL Firm/Company	<u>_C</u>	
PO Box 1565		
Address		
La		
Lawrenceville GA 30046 City/State and Zip Code	<u>, </u>	
penny@majorsmgmt.com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
-	•	
Penny Boynton	at (770) 685-7302	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amount:		

\$55 Filing Fee & Certified Copy

\$25 Filing Fee

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. Name of the limited liability company:	Florida Commercial Properties, LLC	
2. (a) Principal office address of limited liability of	company: 760 Briscoe Blvd	
(Note: MUST BE STREET ADDRESS)	Lawrenceville, GA 30046	
(b) Mailing address of limited liability compan	y: <u>PO Box 1565</u>	
(Note: MAY BE POST OFFICE BOX)	Lawrenceville, GA 30046	
5/9/2003	M0300001482	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office sh	own on the records of the Florida Dept. of State:	
Registered Agent:	CT Corporation System	
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and <u>NEW</u> Registered Agent:	d/or <u>NEW Registered Office address</u> : Robert W. Russell	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRES	1136 Beck Ave	
Mosi ba i boldon on the billion	Panama City ,FL 32401	
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 yote 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.		
Scott A. Moon, LLC Manager Printed or typed name of signee		
Passert When	ent and agree to act in this capacity. I further agree to to the proper and complete performance of the diffes, of my position as registered agent as provided for in ed to merely reflect a change in the registered affice company has been notified in writing of this change.	
Signature of Registered Agent		

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