

M05000006164

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

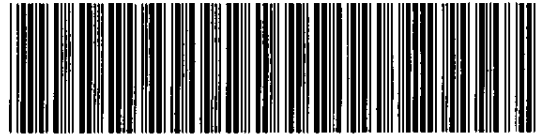
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



500189007095

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2011 JAN 11 AM 10:40  
NOT INTENDED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

B. KOHR  
JAN 11 2011  
EXAMINER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JAN 11 PM 1:31



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 638567 7684078

AUTHORIZATION :

COST LIMIT : \$ 25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JAN 11 PM 1:31

ORDER DATE : January 10, 2011

ORDER TIME : 5:07 PM

ORDER NO. : 638567-008

CUSTOMER NO: 7684078

CHANGE OF AGENT

NAME: FCSL PROPERTIES, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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

CONTACT PERSON: Troy Todd

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

**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: FCSL PROPERTIES, LLC

2. (a) Principal office address of limited liability company: 8787 Baypine Rd.  
Jacksonville, FL 32256  
*(Note: MUST BE STREET ADDRESS)*

(b) Mailing address of limited liability company: 1100 Fifth Ave. S.  
Suite 301  
Naples, FL 34102  
*(Note: MAY BE POST OFFICE BOX)*

11/03/2005 M05000006164

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:

Registered Agent: CT Corporation System

Registered Office Address: 1200 S. Pine Island Rd.  
Plantation, FL 34102

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

NEW Registered Agent: Corporation Service Company

NEW Registered Office Address: 1201 Hays Street  
Tallahassee, FL 32301  
*(MUST BE FLORIDA STREET ADDRESS)*

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.

Maureen Cathell  
*(Signature of a member or authorized representative of a member)*

Maureen Cathell, Authorized Person  
*(Printed or typed name of signee)*

*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 608, 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.*

By: Sylvia Queppet  
*(Signature of Registered Agent)* Sylvia Queppet, Asst. VP

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JAN 11 PM 1:31