

MOS000006876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

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Dean, Mead, Egerton, Bloodworth, Capouano & Bozarth, P.A.

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December 15, 2009

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Re: Reba Y. Mazak

Dear Sir or Madam:

Enclosed please find the following documents for filing with the Department of State -

1. Statement of Change of Registered Office or Registered Agent or both for Corporations re McGraze, LLC
2. Statement of Change of Registered Office or Registered Agent or both for Corporations re Sans Souci, LLC

Also enclosed is our firm's check payable to the Department of State in the amount of \$50 for the aggregate cost of filing the documents.

Please do not hesitate to call if you have any questions.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'B. Malec'.

Brian M. Malec

BMM/ah
Enclosures
cc: Reba Y. Mazak

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: McGraze, 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:

Reba Y. Mazak

Name of Person

McGraze, LLC

Firm/Company

P.O. Box 555

Address

Webster, FL 33597

City/State and Zip Code

rebaym@mpinet.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Reba Y. Mazak

Name of Person

at (352)

568-5382

Area Code & Daytime Telephone Number

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

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TALLAHASSEE, FLORIDA

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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. Name of the limited liability company: McGrazee, LLC

2. (a) Principal office address of limited liability company: 5271 S. U.S. 301

☒ (Note: **MUST BE STREET ADDRESS**) Bushnell, FL 33513

(b) Mailing address of limited liability company: P.O. Box 555

☒ (Note: **MAY BE POST OFFICE BOX**) Webster, FL 33597

12/15/2005
3. Date of filing/registration in Florida

M05000006876
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Paul M. Mazak II

Registered Office Address: 6874 County Road 736
Center Hill, FL 33514

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

NEW Registered Agent: Reba Y. Mazak

NEW Registered Office Address:
(MUST BE FLORIDA STREET ADDRESS) 5271 S. U.S. 301
Bushnell, FL 33513

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.

Reba Y. Mazak
Signature of a member or authorized representative of a member

Reba Y. Mazak, President of Mazak Properties, Inc.
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.

Reba Y. Mazak
Signature of Registered Agent

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