## M07000006583

(Re	equestor's Name)					
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: July 20, 2015

Order#: 711526-001

Re: 1ST AMERICAN ESTATE PLANNING, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Grace Kirby

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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.	Na	nne of the limited liability company: 1ST AMERICAN	ESTATE	PLANNIN	G, LLC
2	(a)	2650 McCormick Dr	_ (b)	2650 Mc	Cormick Dr
	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (5)		lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Ste 200S	<b>_</b> .	Ste 200S	-71-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
		Clearwater FL 33759	<u> </u>	Clearwate	er, FL 33759
		11/05/2007	_	M0700000	6583
3.		Date of filing/registration in Florida	4.	]	Document number
5,	(a)	Corporation Service Company			
٥,	(4)	Registered Agent and Registered Office shown on the records of the	e Florida I	Dept. of State:	
		1201 Hays Street			15 TAL
		Registered Office Address (MUST BE FLORIDA STREET AL	DRESS)		
					TARY IASSI
		Tallahassee , FL_	32301	<del></del>	
	(b)	R. Nathan Hightower, Esq.			52 ATE
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	illice addr	<u>'ess</u> :	)A
		2650 McCormick Dr			
		NEW Registered Office Address:			
		Ste 200S			
				·	
		Tallahassee , FL	33759		
the age wa	cha nt w s/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited liab.	ne registe fility con the limit	ered office a apany, it is i ed liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
		0262	Dona		thorized Person
	-	ure of a member or authorized representative of a member			Printed or typed name of signee
noi	yrea	ny accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete per gations of my position as registered agent as provided if y reflect a change in the registered office address, I held in writing of this change.	e to act it erforman for in Ch reby con	n this capac nce of my di napter 605, nfirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed at limited liability company has been
Sig	natur	e of Registered Agent R. Nathan Hightower, Esq.			