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J. HARRIE

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: SUBJECT:						
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:						
Sheila Hawkins						
Name of Person						
Skybound Development LLC						
Firm/Company						
106 Adris Place						
Address						
Dothan, AL 36303						
City/State and Zip Code						
sheila.hawkins@wincollc.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Sheila Hawkins 334 836-3590 ext 107						
Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
□ \$25 Filing Fee □ □ \$55 Filing Fee & Certified Copy INHS18 (2/14)						

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.

I. Na	ame of the limited liability company: Skybound De	velopi	ment LLC			
2. (a)	Skybound Development, LLC	((b) Skybound Development, LLC			
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)			
	106 Adris Place		106 Adri	s Place		
	Dothan, AL 36303		Dothan,	AL 36303		
	12/14/2007		M070000	07299		
3.	Date of filing/registration in Florida	4.		Document nui	mber	
5. (a)	C T Corporation System					
D. (u)	Registered Agent and Registered Office shown on the records of t	he Florid	la Dept. of State	· ::		
	C T Corporation System					
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>:S)</u>			
	1200 South Pine Island Road					
	Plantation FL	33324	1		: ,,	2217
(b)	Edward Applefield				-	B
(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	•	٠.	_ ,
	Edward Applefield					E E
	NEW Registered Office Address:					
	211 E Lakeshore Drive				L-	<u>क्षत्र </u>
	Panama City Beach , FL	32413	3			
the cha agent v was/we the arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regability of the linited	istered office company, it is mited liability	and the busing hereby confirmation or a pany.	ess office med that as otherw	e of the registered the change(s) rise provided in
	ture of a member of authorized representative of a member			Printed or typed		•
provisi the obl to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office all dress, I led in writing of this plange.	กองโกษ	nance of my a	luties and La	m Familia	ir with and accent
Signatu	re of Registered Ages					

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