

M110000002509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

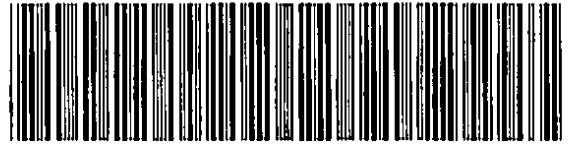
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600327230376

04/10/19--01013--015 **25.00

APPROVED
AND
FILED
2019 APR 10 PM 4:01
CLERK OF THE STATE
TREASURY

T. G.
3/11/19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE SIBYLLINE FUND ~~REDACTED~~ GENERAL PARTNER, 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:

Alan Grayson

Name of Person

Firm/Company

9477 Westover Club Circle

Address

Windermere, FL 34786

City/State and Zip Code

grayson@graysonlaw.net

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

For further information concerning this matter, please call:

Alan Grayson

at (407) 493-9633

Name of Person

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

APPROVED
AND
FILED
2019 APR 10 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. Name of the limited liability company: THE SIBYLLINE FUND GENERAL PARTNER, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

9477 Wesotover Club Circle

9477 Westover Club Circle

Windermere, FL 34786

Windermere, FL 34786

May 17, 2011

M11000002509

3. Date of filing/registration in Florida

4. Document number

5. (a) INCORPORATING SERVICES, LTD.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1540 GLENWAY DRIVE

TALLAHASSEE, FL 32301

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

Alan Grayson

NEW Registered Office Address:

9477 Westover Club Circle

Windermere, FL 34786

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.

Alan Grayson

Signature of a member or authorized representative of a member

Alan Grayson

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 605, 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.

Alan Grayson

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

FILED
2019 APR 10 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FL 32301