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LLC RO Chares

JUL 03 2014 T. CARTER

COVER LETTER

TO: Registration Section

INHS18 (2/14)

Divi	sion of Corporations				
SUBJECT:	603 CORAL CIRCLE, LLC				
	Name of Limited Liability Company				
Dear Sir or N	Madam:				
The enclosed	d Registered Agent/Registered Of	fice Change	and fe	e(s) are submitted for filing.	
Please return	all correspondence concerning th	nis matter to	the fol	llowing:	
Brandon D). Beardsley				
	Name of Person			•	
Mowrey, S	Shoemaker & Beardsley, P.L				
	Firm/Company				
2801 N. TI	hird Street				
	Address				
St. August	ine, FL 32084				
	City/State and Zip Code				
bbeardsle	y@ancientcitylaw.com				
E-mail	address: (to be used for future and	nual report n	otifica	tion)	
For further in	nformation concerning this matter	, please call	:		
Brandon D). Beardsley	904		824-5711	
	Name of Person			Area Code & Daytime Telephone Number	
Regi Divi Clift 2661	stration Section sion of Corporations on Building Executive Center Circle shassee, Florida 32301		Regis Divis P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 hassee, Florida 32314	
Enclosed is a check for the following amount:					
2 \$2	25 Filing Fee		\$55	Filing Fee & Certified Copy	

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. N	lame of the limited liability company: 603 CORAL C	CIRCLE, L	LC	
2. (a)		(b)		
2. (u,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	_	imited liability company: POST OFFICE BOX)
	4950 S Yosemite St. F2-157	4	950 S Yosemite St. F	F2-157
	Greenwood Village, CO 80111	_ G	reenwood Village, C	O 80111
	December 14th 2012 Date of filing/registration in Florida	M′	12000007005	
3.	Date of filing/registration in Florida	4.	Document num	ber
5. (a	Brandon D. Beardsley			
	Registered Agent and Registered Office shown on the records of		et, of State:	
	Registered Office Address (MUST BE FLORIDA STREET)	<u>4DDKESS)</u>		
	2825 Lewis Speedway, Suite 107			
	St. Augustine .FL	32084		. =
				SEC ALL
(b			<u></u>	
	Enter name of NEW Registered Agent and/or NEW Registered	Office addres	<u>ss</u> :	<u> </u>
				2 190
	NEW Decision of Office Address			$\omega = \frac{\pi}{2\pi}$
	NEW Registered Office Address:			o 224
	2801 N. Third Street			ω Dm >
	St. Augustine, FL	32084		
the c agent was/the a Sig I her prove to me notif	limited liability company is not organized under the law hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lies were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the mature of a member or authorized representative of a member reby accept the appointment as registered agent and agrissions of all statutes relative to the proper and complete beligations of my position as registered agent as provide prely reflect a change in the registered office address. I lied in writing of this change.	f the register ability composed the limited liable ree to act in a performance of for in Charles y conf	red office and the busine pany, it is hereby confirm d liability company or as pility company. Printed or typed not this capacity. I further this capacity. I further apter 605, F.S. Or, if this irm that the limited liability.	ess office of the registered med that the change(s) is otherwise provided in agree to comply with the infamiliar with and accept is document is being filed ility company has been
	Division of Corporations • P.O.	Box 6327◆	Tallahassee, FL 32314	

FILING FEE: \$25.00

INHS18 (2/14)