

M13 0000000741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

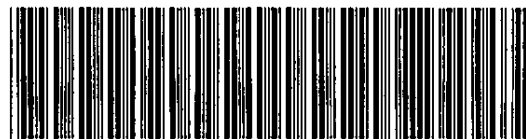
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

DEC - 3 2013

A. LUNT

Office Use Only



500254065005

11/25/13--01015--009 **25.00

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

2013 NOV 25 PM 15 20

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GREEN GOLF PARTNERS, 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:

Toby Bonar

Name of Person

Green Golf Partners, LLC

Firm/Company

6084 E Beck Lake Road S

Address

Kendallville, IN 46755

City/State and Zip Code

toby@greengolfpartners.com

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

For further information concerning this matter, please call:

Toby Bonar

Name of Person

at (317) 745-9004 x108

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

2018 NOV 25 PM 4:20
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

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: GREEN GOLF PARTNERS, LLC

2. (a) Principal office address of limited liability company: 1001 CARTERSBURG ROAD
DANVILLE, IN 46122
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 1001 CARTERSBURG ROAD
DANVILLE, IN 46122
(Note: MAY BE POST OFFICE BOX)

FEBRUARY 4, 2013

3. Date of filing/registration in Florida

M13000000741

4. Document number

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

Registered Agent: ADAM STUCK


Registered Office Address: 75190 FERN CREEK DRIVE
YULEE, FL 32097

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

NEW Registered Agent: THOMAS H RODEMS

NEW Registered Office Address: C/O BELLEVIEW BILTMORE GOLF CLUB
(MUST BE FLORIDA STREET ADDRESS) 1501 INDIAN ROCKS ROAD
BELLEAIR, FL 33756

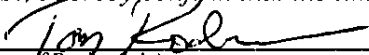
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida 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.


Signature of a member or authorized representative of a member

MICHAEL K. SHAW

Printed or typed name of signer

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.


Signature of Registered Agent

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

FILING FEE: \$25.00