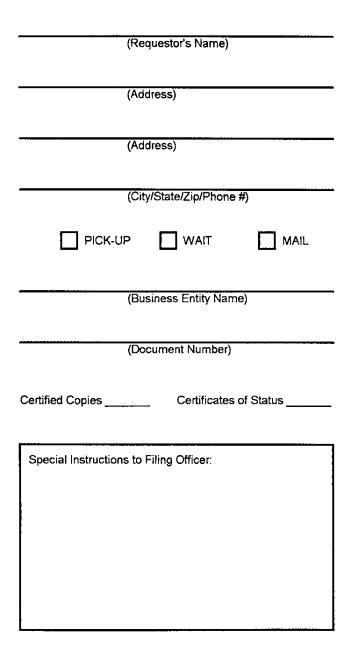
# M13000001379



Office Use Only



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B. BOSTICK
NOV 2 0 2013
EXAMINER

### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: BLUEBIRD CAPITAL CIRCLE 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:

# LINDA CRISP

Name of Person

# **BLUEBIRD14 HOLDINGS LLC**

Firm/Company

P O BOX 10809

Address

DAYTONA BEACH FL 32120-0809

City/State and Zip Code

LCRISP@CTLC.COM

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

For further information concerning this matter, please call:

LINDA CRISP

<sub>at</sub> 386

944-5632

Name of Person

Area Code & Daytime Telephone Numbe

#### 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

INHS18 (5/08)

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# A 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. Na	me of the limited liability company: BLUEBIRD CAPITAL CI	RCLE LLC			
2 (a)	Principal office address of limited liability company	· 1530 CORNERSTONE BLVD STE 100			
2. (u)	(Note: MUST BE STREET ADDRESS)	DAYTONA BEACH FL 32117			
(b)	Mailing address of limited liability company:	P O BOX 10809			
	(Note: MAY BE POST OFFICE BOX)	DAYTONA BEACH FL 32120-0809			
MARCH	4. 2013	M13000001379			
3. Da	ite of filing/registration in Florida	4. Document number			
5 (6	) Registered Agent and Registered Office shown on t	ha ragarda of tha Florida Da	nt of S	Statas	
J. (a)	Registered Agent and Registered Office shown on t	ne records of the Florida De	pi. or s	state.	
	Registered Agent:	REGISTERED AGENT SOLUTIONS, INC	<u>;.                                    </u>		
	Registered Office Address:	155 OFFICE PLAZA DRIVE, STE A		r.>	
	<b>3</b>	TALLAHASSEE FL 32301	-		
					<u>:</u>
(h)	Enternance of NEW Designand Agent and/or NEW	V Danistavad Office addus	<i>&gt;</i> .=	41.5%, 	
(0)	Enter name of <b>NEW Registered Agent</b> and/or <b>NEW</b>	v Registered Office addres	<u>is</u> ::	œ	
	<u>NEW</u> Registered Agent:	LINDA CRISP		<u> </u>	
	NEW Registered Office Address:	1530 CORNERSTONE BLVD., STE 100	9		
	(MUST BE FLORIDA STREET ADDRESS)		E)I	σ	
		DAYTONA BEACH	,FL;	32117	
confir and the liabili the m the or	limited liability company is not organized under the lamed that after the change or changes are made, the Flore business office of the registered agent will be identify company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise perating agreement of the limited liability company conscilled ted Tomoka Land to as managing and of a member or authorized representative of a member	orida street address of the re cal. Or, in the case of a Flo was/were authorized by an a e provided in the articles of	egistere rida lin affirma organi	d office nited tive vo	te of or
LINDA C	CRISP				
	or typed name of signee	-			
addre	eby accept the appointment as registered agent and as with the provisions of all statutes relative to the proam familiar with and accept the obligations of my poster 608, F.S. Or, if this document is being filed to ment is the confirm that the limited liability company	gree to act in this capacity. per and complete performa sition as registered agent as ely reflect a change in the r has been notified in writing	I furthence of in provide gister gister	er agre my duti led for i ed offic s chang	e to es, in :e :e.
Signatu	ure of Registered Agent ( )				

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