

M14000004770

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

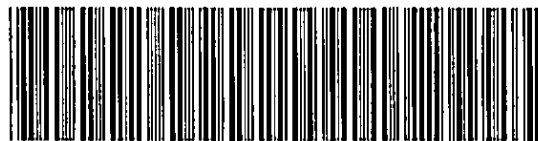
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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18 JAN 30 PM 3:31  
JAN 30 2018  
JAN 30 2018

C. SIMONS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 10, 2018

CURT PLYER  
9660 FALLS OF NEUSE RD  
STE 138 #250  
RALEIGH, NC 27615

SUBJECT: FORT HILL ASSOCIATES, LLC  
Ref. Number: M14000004770

We have received your document for FORT HILL ASSOCIATES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist II

Letter Number: 218A00000586

RECEIVED

JAN 30 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FORT HILL ASSOCIATES, 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:

CURT PLYLER

\_\_\_\_\_  
Name of Person

FORT HILL ASSOCIATES, LLC

\_\_\_\_\_  
Firm/Company

9660 FALLS OF NEUSE RD, STE 138, #250

\_\_\_\_\_  
Address

RALEIGH, NC 27615

\_\_\_\_\_  
City/State and Zip Code

cplyler@forthillassociates.com

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

For further information concerning this matter, please call:

CURT PLYLER

\_\_\_\_\_  
Name of Person

at ( 919 ) 521-4476

\_\_\_\_\_  
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

*\$35 paid previously*

**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: FORT HILL ASSOCIATES, 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**)

37 VILLA RD, SUITE 106

37 VILLA RD, SUITE 106

GREENVILLE, SC 29615

GREENVILLE, SC 29615

7/7/2014

M14000004770

3. Date of filing/registration in Florida

4. Document number

5. (a) CURT PLYLER

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

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

7900 OAK LANE STE 400

MIAMI LAKES, FL 33016

(b) \_\_\_\_\_

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

**NEW** Registered Office Address:

127 W FAIRBANKS AVE, #383

WINTER PARK, FL 32789

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.

Curt Plyler

Signature of a member or authorized representative of a member

CURT PLYLER

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.*

Curt Plyler

Signature of Registered Agent