

3/14/2019

Division of Corporations

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
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**LLC REGISTERED AGENT CHANGE
SAYERS CONSTRUCTION, LLC**

Certificate of Status	0
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0115 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: SAYERS CONSTRUCTION, LLC

2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)

510 Hearn Street

AUSTIN, TX 78703

07/25/2014

(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

510 Hearn Street

AUSTIN, TX 78703

M13000001303

3. Date of filing/registration in Florida: 4. Document number

5. (a) MARK SAYERS

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

Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)

901 PECKY CIR. #502

NAPLES

FL 34113

(b) Enter name of NEW Registered Agent under NEW Registered Office address:

C T Corporation System

NEW Registered Office Address:

1206 South Pine Island Road

Plantation

FL 33324

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

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 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.

By: Kimberly Laughrey Kimberly Laughrey, Assistant Secretary
Signature of Registered Agent

Division of Corporations • P.O. Box 6317 • Tallahassee, FL 32314

FILING FEE: \$15.00

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