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S. PRATHER

COVER LETTER

Division of Corporations	
HIGHSMITH HOMES XIV, LLC	
	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
CAL D. SMALLWOOD, CPA	
Name of Person	
SMALLWOOD AND ASSOCIATES, PLLC	
Firm/Company	
5320 PLEASANT RUN ROAD	
Address	
COLLEYVILLE, TX 76034	
City/State and Zip Code	
CAL@SMALLWOODCPA.COM	
E-mail address: (to be used for future annual report	rt notification)
For further information concerning this matter, please ea	all:
CAL D. SMALLWOOD, CPA	17 427-1040
Name of Person	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

INHS18 (2/14)

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	Name of the limited liability company: HIGHSMITH	HOMES	S XIV, LLC
2. (a)	HIGHSMITH HOMES XIV, LLC	(b)	, HIGHSMITH HOMES XIV, LLC
2. (4,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	4108 CARNATION DR.		4108 CARNATION DR.
	ARLINGTON, TX 76016	<u></u>	ARLINGTON, TX 76016
	DECEMBER 23, 2014	N	M15000000131
3.	Date of filing/registration in Florida	4.	Document number
5. (a	LEGALINC CORPORATE SERVICES, INC		
J. (a	Registered Agent and Registered Office shown on the records of	f the Florida [Dept, of State;
	5237 SUMMERLIN COMMONS		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	2
	SUITE 400		
	FORT MEYERS , FI	33907	23
(b)	JAMES LEE HIGHSMITH		
(0,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addi	dress:
	2370 BARONSMEDE CT.		
	NEW Registered Office Address:		
	WINTER GARDEN	34787	
	, rı	L	
the chagent was/v	limited liability company is not organized under the la lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	f the regist iability con of the limit limited lia	stered office and the business office of the registere impany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee
provi: the ob to me notife	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete obligations of my position as registered agent as provide rely reflect a grange in the registered office address, I so in writing of this change	ree to act i e performan ed for in Cl hereby con	in this capacity. I further agree to comply with the ince of my duties, and I am familiar with and accep hapter 605, F.S. Or, if this document is being filed infirm that the limited liability company has been

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

INHS18 (2/14)