P10000089433

| (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: |
| |
| |
| |

Office Use Only



200192985282

02/03/11--01028--021 **35.00

11 FEB -3 PM 1:46

C.COULLIETTE

FEB 0 4 2011

EXAMINER

VIA US MAIL

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: L&M COREY, INC.

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

- 1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2. \$35.00 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Respectfully,

REGISTERED AGENT SOLUTIONS, INC.

515 Congress Ave 8te 2300 Austin, Jy

7870/

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, statement of change is submitted for a corporation organized under the laws of the State of Florida | | - |
|---|-----------------------------------|------------------|
| in order to change its registered office or registered agent, or both, in the State of Florida. | | |
| 1. The name of the corporation: L&M COREY, INC. | | |
| 2. The principal office address: 40105 French Road Lady Lake, FL 32159 | | |
| 3. The mailing address (if different): 40105 French Road Lady Lake, FL 32159 | | |
| 4. Date of incorporation/qualification: 11/01/2010 Document number: P100000 | 089433 | } |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) | | |
| COREY, MICHAEL | | |
| 155 OFFICE PLAZA DR., SUITE A | | 꾶 |
| TALLAHASSEE FL 32301 | = | ¥\$ Series |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): | FEB -3 | ON OF SO |
| REGISTERED AGENT SOLUTIONS, INC. | PH | |
| 155 OFFICE PLAZA DR. SUITE A P.O. Box. NOT acceptable | 91:1 | PANIS PANIS |
| TALLAHASSEE FL 32301 | | 3. |
| The street address of its registered office and the street address of the business office of its registe as changed will be identical. | red agen | ıt, |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer sauthorized by the board, or the corporation has been notified in writing of the change. | SO | |
| Les lie Corey, Secreta Signature of an officer or diffector Les lie Corey, Secreta | M. | ÷ |
| 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 pe of my duties, and I am familiar with and accept the obligation of my position as registered agent document is being filed merely to reflect a change in the registered office address, I hereby confir corporation has been notified in writing of this change. | rforman Or, if ti m that ti | ice his he |
| Signature of Registered Agent Date | | - |
| If signing on behalf of an entity: | | |
| Jennifer Escobedo, Asst. Secretary Typed or Printed Name | | |
| * * * FILING FEE: \$35.00 * * * | | |

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)