

P20000073704

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

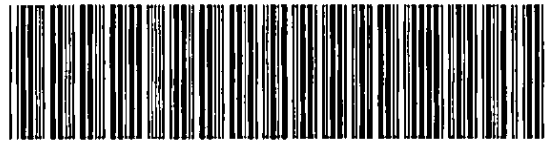
(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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JUN - 5 2021

June 1, 2021

LAWERENCE M. BURRELL JR.  
LAWERENCE M BURRELL JR PA  
2880 S.E. DOWNWINDS ROAD  
JUPITER, FL 33478 US

SUBJECT: HGP PHIPPS MANAGEMENT INC.  
Ref. Number: P20000073704

We have received your document for HGP PHIPPS MANAGEMENT INC. 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 LIMITED LIABILITY COMPANY, but your entity is a CORPORATION. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White  
Regulatory Specialist II Supervisor

Letter Number: 921A00011800

*Sent to HP  
for Signature*

The Law Office of  
**LAWRENCE M. BURRELL, JR., P.A.**  
Attorney and Counselor at Law

Lawrence M. Burrell, Jr.  
General Civil Litigator

Paralegal  
Pamela Burrell, R.N.

2880 S.E. Downwinds Rd.  
Jupiter, Fla. 33478

(561) 747-5705  
Facsimile: (561) 747-0352

July 8, 2021

Email: [attorney@lmburrell.com](mailto:attorney@lmburrell.com)  
Website: [www.lmburrell.com](http://www.lmburrell.com)

Florida Department of State  
Division of corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

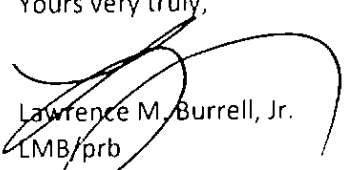
Re: HGP Phipps Management, Inc.  
Ref No. P0000073704  
Our File 40-0009

Dear Florida Department of State, Division of Corporations

Per your letter of June 1, 2021 we are enclosing a copy of your letter and the signed Statement of Change of Registered Office or Registered Agent or Both for Corporations and check 2186 in the amount of \$35.00 which was requested.

Thank you for your help and cooperation.

Yours very truly,



Lawrence M. Burrell, Jr.  
LMB/prb  
Enclosures

**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, this 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: HGP Phipps Management, Inc.
2. The principal office address: 2880 SE Downwinds Rd, Jupiter Fl 33478
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 9-22-20 Document number: P00000 73704
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)

Robert Hayden  
3732 NW 16th St.  
FT Lauderdale, Fl 33311

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Lawrence M. Burrell, Jr.  
2880 SE Downwinds Rd  
Jupiter Fl 33478

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

X Hubert Phipps  
Signature of an officer or director

Hubert Phipps  
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]  
Signature of Registered Agent

6-9-21  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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 (04/13)