

P99000064673

Holland & Knight LLP

Requestor's Name

315 SOUTH CALHOUN STREET

Address

Tallahassee, Florida 32301

City/State/Zip

Phone #

425-5686

Office Use Only

99 AUG -5 PM 3:02
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Liberty Vineland, Inc (Corporation Name) (Document #) CA
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #) Change
4. _____ (Corporation Name) (Document #)

☒ Walk-in

☒ Pick up time 4:00

☐ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Franchise
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of F.A. Officer/ Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark

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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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Liberty Vineland, Inc.

2. The mailing address of the corporation is: 310 West Central Parkway, Suite 7000
Altamonte Springs, Florida 32714

3. Date of incorporation/qualification: July 21, 1999 Document number 88000064673

4. The name and address of the current registered agent and office:

Jeffrey P. Wieland
200 So. Orange Avenue, Suite 2600
Orlando, Florida 32801

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

W. Michael Mikkelsen
310 West Central Parkway, Suite 7000
Altamonte Springs, Florida 32714

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.

Wm. Michael Mikkelsen
(Signature of an officer, chairman or vice chairman of the board)
W. Michael Mikkelsen, President
W. Michael Mikkelsen, President
(Printed or typed name and title)

7-30-99
(Date)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Wm. Michael Mikkelsen
(Signature of Registered Agent)
W. Michael Mikkelsen, President

7-30-99
(Date)

If signing on behalf of an entity:

(Typed or Printed Name) (Capacity)

*** FILING FEE: \$35.00 ***