

U50000624986

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

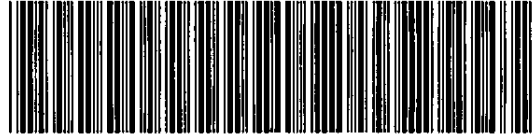
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 28 2015

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

15 OCT 28 PM 12:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

October 8, 2015

SUZY SPENCE
3640 SCENIC HWY 98
DESTIN, FL 32541

SUBJECT: SPIRIT RENTALS LLC
Ref. Number: L15000124986

We have received your document for SPIRIT RENTALS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A post office box is not an acceptable address for the registered agent.

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) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 915A00021350

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Spirit Rentals LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Suzy Spence

Name of Person

Firm/Company

3640 Scenic Hwy 98

Address

Destin, FL 32541

City/State and Zip Code

tracie@thecamfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Suzy Spence

850

837-3325

at ()

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

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TALLAHASSEE, FLORIDA

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. Name of the limited liability company: Spirit Rentals LLC

2. (a) 3640 Scenic Hwy 98 (b) 3640 Scenic Hwy 98

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

Destin, FL 32541

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

Destin, FL 32541

July 21, 2015

L15000124986

3. Date of filing/registration in Florida

4. Document number

5. (a) Suzy Spence

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3640 Scenic Hwy 98

Destin, FL 32541

(b) Tracie Martin

Enter name of NEW Registered Agent and/or NEW Registered Office address:

4640 GULF STAR DR.

NEW Registered Office Address:

PO Box 0086

Miramar Beach

DESTIN

FL 32650

32541

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TALLAHASSEE, FLORIDA

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.

DocuSigned by:

Tracie Martin

Tracie Martin

Signature of a member or authorized representative of a member

Printed or typed name of signee

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.

Signature of Registered Agent

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