

# NORTH CAROLINA

## Department of the Secretary of State

To all whom these presents shall come, Greetings:

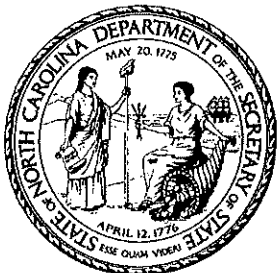
I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

**CHANGE OF REGISTERED OFFICE AND/OR REGISTERED AGENT**

**OF**

**LONG BRANCH VILLAGE OWNERS ASSOCIATION, INC.**

the original of which was filed in this office on the 13th day of August, 2018.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 13th day of August, 2018.

*Elaine F. Marshall*

Secretary of State

STATE OF NORTH CAROLINA  
DEPARTMENT OF THE SECRETARY OF STATE

STATEMENT OF CHANGE OF REGISTERED  
OFFICE AND/OR REGISTERED AGENT

Pursuant to §55D-31 of the General Statutes of North Carolina, the undersigned entity submits the following for the purpose of changing its registered office and/or registered agent in the State of North Carolina.

INFORMATION CURRENTLY ON FILE

The name of the entity is: Longbranch Village Owners Association, Inc

The street address and county of the entity's registered office currently on file is:

Number and Street: 222 Dedication Drive  
City: Hope Mills State: NC Zip Code: 28348 County: Cumberland

The mailing address *if different from the street address* of the registered office currently on file is:

Number and Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: NC Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

The name of the current registered agent is: Stephenson, John P

NEW INFORMATION

1. The street address and county of the new registered office of the entity is:  
*(complete this item only if the address of the registered office is being changed)*

Number and Street: 2939 Breezewood Avenue Suite 100  
City: Fayetteville State: NC Zip Code: 28303 County: Cumberland

2. The mailing address *if different from the street address* of the new registered office is:  
*(complete this item only if the address of the registered office is being changed)*

Number and Street: P O Box 87209  
City: Fayetteville State: NC Zip Code: 28304 County: Cumberland

3. The name of the new registered agent and the new agent's consent to appointment appears below:  
*(complete this item only if the name of the registered agent is being changed)*

Little & Young Inc.  
*Type or Print Name of New Agent*

Tammy Six, Sec  
*\* Signature & Title*

4. The address of the entity's registered office and the address of the business office of its registered agent, as changed, will be identical.

5. This statement will be effective upon filing, unless a date and/or time is specified: \_\_\_\_\_

This is the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Longbranch Village Owners Association, Inc

Tammy Six, Secretary  
*Entity Name*  
*Signature*

Notes: Filing fee is \$5.00. This document must be filed with the Secretary of State.

*Type or Print Name and Title*

\* Instead of signing here, the new registered agent may sign a separate written consent to the appointment, which must be attached to this statement.