LD200000042

(Requestor's Name)			
(Address)	000158547550		
(Address)			
(City/State/Zip/Phone #)	08/06/0901021011 **25.00		
(Business Entity Name)	Company of the second of the s		
. (Document Number)			
Certified Copies Certificates of Status	\$		

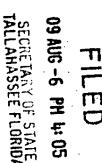
Special Instructions to Filing Officer:

L. SELLERS

AUG;-7 2009

EXAMINER

Office Use Only



COVER LETTER

TO: Registration Division of C					ž
SUBJECT:	EUGENE BI				
	Name of	Limited	l Liabi	ility Comp	oany
Dear Sir or Madam:					
The enclosed Registe	ered Agent/Registered (Office (Change	e and fee(s	s) are submitted for filing.
Please return all com	espondence concerning	this m	atter to	o the follo	wing:
					-
EU	IGENE E. BECKER				
	Name of Person				
EUGENE BE	CKER & ASSOCIATI	ES. LL	.C		
	Firm/Company	···-,			
15	158 BRO <u>LIO L</u> ANE				
	Address			_	
N.	APLES, FL 34110				
	ity/State and Zip Code				
E-mail address: (to be	used for future annual report r	otificatio	n)		
For further informati	on concerning this matt	er, plea	se cal	1:	
	J				
FUGENE	E. BECKER	-+ (239	`	594-7711
	f Person	_ at (209	Area Code &	b Daytime Telephone Number
STREET/CO Registration Se	URIER ADDRESS:			AILING A	
Division of Co				gistration S	orporations
Clifton Buildir	-			D. Box 6327	•
	e Center Circle		Tal	lahassee, F	lorida 32314
Tallahassee, Fl	orida 32301				
Enclosed is a	check for the following	ng amo	unt:		
 √ \$25 Filing	Fee		☐].\$ ⁴	55 Filing F	Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: <u>EUGENE</u>	<u> </u>
2. (a) Principal office address of limited liability company	7: 15158 BROLIO LANE
(Note: MUST BE STREET ADDRESS)	NAPLES, FL 34110
(b) Mailing address of limited liability company:	15158 BROLIO LANE
(Note: MAY BE POST OFFICE BOX)	NAPLES, FL 34110
01/29/2002	L02000002242
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	-
Registered Agent:	EDWIN B. ZASLOW, ESQ.
Registered Office Address:	5901 S.W. 74th Street
	Suite 205 South Miami, FL 33143
NEW Registered Agent:	EDWIN B. ZASLOW, ESQ.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	801 N.E. 167th Street Suite 200 North Miami Beach ,FL33162
If the limited liability company is not organized under the legistered that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	aws of the State of Florida, it is hereby orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote
Signature of a member or authorized representative of a member EUGENE E. BECKER	SEE F
Printed or typed name of signee	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proving and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or finis document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacing Afuner agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office 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