10300004524

(Re	equestor's Name)	 	
	•		
(Address)			
(Address)			
(Cit	ty/State/Zip/Phone	≥ #)	
•	•	,	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nar	ne)	
(Do	ocument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
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D. BRUCE

OCT 18 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: CANEY RUN, LLC Name of Limits	ed Liability Company	_		
	ou sinomy 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:			
Myra Homer Name of Person				
Name of Person				
Capitol Services Registered Agent	Department			
Firm/Company	·····			
800 Brazos, Suite 400		100 M	70	
Address			8	
		7	_	Manifestation .
Austin, Texas 78701		SEY SE	വ	1
City/State and Zip Code		Y OF	P	
mhomer@capitoleenvices co	m	107 107 108	$\ddot{\wp}$	
mhomer@capitolservices.co	tion)	35	<u>ଅ</u>	
For further information concerning this matter, pl	ease call:	13×		
No. of Change	000 045 4047			
Myra Homer at (Area Code & Daytime Telephone Number	_		
	Add Code & Sayimo Polephone Names			
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314			
•	2011			
Enclosed is a check for the following an				
\$25 Filing Fee	\$55 Filing Fee & Certified Copy			

INHS18 (5/08)

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.

Name of the limited liability company: CANEY	RUN, LLC		
2. (a) Principal office address of limited liability comp	4404 N. Moog Ctroot		
	El Paso, TX 79902		
(Note: MUST BE STREET ADDRESS)			
(b) Mailing address of limited liability company:	4401 N. Mesa Street		
(Note: MAY BE POST OFFICE BOX)	El Paso, TX 79902		
2/6/2003	L03000004524		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:		
Registered Agent:	CT Corporation System		
Registered Office Address:	gistered Office Address: 1200 S. Pine Island Rd.		
	Plantation FL 33324		
(h) Enter name of NEW Designated Agent and/or I	NEW Pagistayed Office address:		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>I</u>			
NEW Registered Agent:	Capitol Corporate Services, Inc.		
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Drive, Suite A		
MUST BE PLONIDA STREET ADDRESS	Tallahassee , FL 32301		
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company or as of or the operating agreement of the limited liability company or as of or the operating agreement of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member GUSANNE SMITH Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability company.	ne Florida street address of the registered office dentical. Or, in the case of a Florida limited se(s) was/were authorized by an affirmative vote therwise provided in the articles of organization pany.		
Ollanie Case Delanie Case, Asst. Si	ecretary on Six Q		
Signature of Registered Agent behalf of Capitol Corporations P.O. Roy			
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00			
INHS18 (05/08)			