L07000071353

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)	_				
<u>_</u>					
PICK-UP WAIT MAIL					
(Business Entity Name)	_				
(Susiness Entry Warte)					
(Document Number)					
Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					
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Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations		•						
SUBJI	2253 EDWARD ROAD (VEG)	LLC							
., (1,,,1		of Lim	ited Liability Company						
Dear S	ir or Madam;								
The en	closed Registered Agent/Registered Office	Chang	ge and fee(s) are submitted for filing.						
Please	return all correspondence concerning this i	natter	to the following:						
FREC	DERICK GRACE								
	Name of Person								
GRA	CE DEVELOPMENT								
	Firm/Company								
3309	FAIRMONT DRIVE								
	Address								
NASH	HVILLE TN 37203								
	City/State and Zip Code								
RSFI	ELD@GMAIL.COM								
Ē	-mail address: (to be used for future annua	l repor	t notification)						
For fur	ther information concerning this matter, pl	ease ca	all:						
ROBE	ERT FIELD	at (561-459-2770						
	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:								
	2 \$25 Filing Fee		□ \$55 Filing Fee & Certified Copy						

INHS18 (2/14)

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.

I. Na	nme of the limited liability company: 2253 EDWA	RD RO	AD (VE	G) LLC		
2. (a)						
,	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)		~/ _	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	3309 FAIRMONT DRIVE		3309	FAIRMONT DRIVE		
	NASHVILLE TN 37203		NASH	IVILLE TN 37203		
	07-10-07		L0700	0071353		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Der CORPORATION SERVICE COMPANY Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1201 HAYS ST.					
	TALLAHASSEE	3230	\1	BP 27 PII		
(b)	Enter name of NEW Registered Agent and/or NEW Registered ROBERT FIELD	SEP 27 PH 7: 09				
	NEW Registered Office Address:			<u> </u>		
	241 BRADLEY PLACE					
	PALM BEACH	3348	30			
the cha agent w was/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- tere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	f the regi ability co of the lin limited	stered of ompany, nited liab liability o	fice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in		
Signat	ure of a member or authorized representative of a member			Printed or typed name of signee		
I herel provision the oblit to mere notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I fin writing of this change.	ree to ac perform d for in hereby c	t in this c sance of r Chapter (confirm th	apacity. I further agree to comply with the iv duties, and I am familiar with and accept 605, F.S. Or. if this document is being filed at the limited liability company has been		
попрес	re of Registered Agent	петеоу с	onjirm in	асте итпеа навину сотрак		