(Re	equestor's Name)			
(Address)				
(Ac	idress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only

G. MCLEOD APR 2 9 2011 **EXAMINER** 



300204038503

04/26/11--01028--030 \*\*25.00

## **COVER LETTER**

**TO:** Registration Section

Division of Corpora	itions			
SUBJECT:	4	BZ Holding	gs LLC	
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered A	gent/Registered O	ffice Change	and fee(s) are submitted for	filing.
Please return all correspond	lence concerning	this matter to	the following:	
	/ J Forbes		_	
Name	of Person			
Firm/C	Company		_	
	ngton Park Drive	<del> </del>	_	
Jacksonv	rille, FL 32225		_	
City/State	and Zip Code		_	
forebz E-mail address: (to be used for	:@aol.com r future annual report no	otification)	_	
For further information con	cerning this matte	r, please call:		
Betty Forb	es	at ( 904	379-3789	
Name of Person		/	Area Code & Daytime Telephone Num	iber
STREET/COURIER	ADDRESS:	: MAILING ADDRESS:		
Registration Section		Registration Section		
Division of Corporation	ons	Division of Corporations		
Clifton Building	-	P.O. Box 6327		
2661 Executive Cente	r Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 3				
Enclosed is a check	for the following	g amount:		
<b>✓</b> \$25 Filing Fee		☐ <b>\$</b> 55	5 Filing Fee & Certified Cop	у

## 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:	4BZ Holdings LLC		
2. (a) Principal office address of limited liability compa	ny:		
(Note: MUST BE STREET ADDRESS)	2251 Fagle Harbor Parkway Fleming Island, FL 32003		
(b) Mailing address of limited liability company:			
(Note: MAY BE POST OFFICE BOX)	2251 Eagle Harbor Parkway Fleming Island, FL 32003		
3-10-2009	L09000023131		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:		
Registered Agent:	Betty J Forbes ₹ =		
Registered Office Address:	2251 Eagle Harbor Parking Fleming Island, FL 32093: 25		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW Registered Agent</u> :	W Registered Office address: $\omega$		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1477 Harrington Park Drive  Jacksonville ,FL32225		
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.  Signature of a member or authorized representative of a member  Betty J Forbes  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 p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address, I hereby confirm that the limited liability company	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in herely reflect a change in the registered office my has been notified in writing of this change.		

Signature of Registered Agent