Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H130002679703)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

Firom:

Account Name : AKERMAN LLP - ORLANDO

Account Number : 076656002425

Phone : (407)423 4000 Fax Number ; (407)843-6610

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

susan.barch@akerman.com

Email Address:_

LLC REGISTERED AGENT CHANGE 1830 GERDA INVESTMENT LLC

Certificate of Status	. 0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

T CLINE

Electronic Filing Menu

Corporate Filing Menu

Help

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: 1830 Gerda Investm	ent LLC	···	
 (a) Principal office address of limited liability company (Nate: MUST BE STREET ADDRESS) 	1830 Gerda Тептасе Oriando, Г.L. 32804		
(b) Mailing address of limited liability company; (Note: MAY BE POST OFFICE BOX)	1830 Gerda Terrace Ortando, FL 32804		
10/26/2009	L09000102891	78 Zi	
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida E	ept of State:	j ^r
Registered Agent:	James E. Foster		<u> </u>
Registered Office Address:	420 S Orange Ave Suite 1200		Ą
	Orlando, FL 32801	- 1917 - 13 - 1317 - 1317 - 1317 - 1317 - 1317 - 1317 - 1317 - 1317 - 1317 - 1317 - 1317 - 1317 - 1317 - 1317 - 1317 - 1317	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1830 Gerda Terrace Orlando, FL 32804	FI.	
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a thember or authorized representative of a member	orida street address of the coal. Or, in the case of a Fi was/were authorized by ar	registered off orida limited Laffirmative v	vote of
Sandrea B. Foster Printed or typed name of sience	-		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro- and I am familiar with and accept the obligations of my post Chapter 608, I.S. Or, if this document is being filed to mer addiess, I hereby confirm that the limited liability company	pee to act in this capacity, per and complete perform ition as registered agent a cly reflect a change in the has been notifical in writh	I further ag ance of my di is provided fo registered of ig of this chai	ree to diex, r in fice nye.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00