L99000007910

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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Incorporating Services, Ltd. - Melissa A. Murry

Requestor's Name

2855 Apalachee Pkwy., Bldg. A, Suite 16

Address

Tallahassee, FL 32301 656-7956

City/State/Zip Phone #

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Mayleur, LLC L99000007910
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☑ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

CR2E031(7/97)

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

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TALLAHASSEE, FLORIDA

June 9, 2005

MAYLEUR, LLC
2641 E ATLANTIC BLVD, #308
POMPANO BEACH, FL 33062

SUBJECT: MAYLEUR, LLC
REF: L99000007910

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TALLAHASSEE, FLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

You submitted the Registered Agent change for a corporation not a Limited Liability Company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Document Specialist

FAX Aud. #: H05000126182
Letter Number: 705A00040435

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TALLAHASSEE, FLORIDA

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. The name of the limited liability company is: MAYLEUR LLC

2. The mailing address of the limited liability company is: SOVEREIGN HOUSE, STATION ROAD, ST JOHNS, ISLE OF MAN

11/2/1999
3 Date of filing/registration in Florida

L99000007910
4 Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Fencon, LLC
Name
2641 E. Atlantic Blvd., #308
Address
Pompano Beach, FL 33062
City, State and Zip

6. The name and address of the new registered agent and/or office:

INCORPORATING SERVICES LIMITED
Name
2855 APALACHEE PARKWAY, BLDG A, SUITE 10,
Florida street address (P.O. Box NOT acceptable)

TALLAHASSEE FL 32301.
City, State and Zip

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)

Sharon Lancaster on behalf of Owl Investments Limited
(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INTS/R(10/99)

FILING FEE: $25.00

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