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C. LEWIS FEB 177009 **EXAMINER**

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 13750 TREELINE LLC	
(Name	e of Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	ng this matter to the following:
DICK URLICH, ESQ. Richard A. (Name of Person)	Ulrut, ESE
ل) ورد JUDD,U RLICH SCARLETT,SUMMONTE & DE (Firm/Company)	EAN,P.A.
2940 SOUTH TAMIAMI TRAIL (Address)	
SARASOTA,FL 34239	
(City/State and Zip Code)	
For further information concerning this ma	atter, please call:
MICHAEL LANDESMAN	at (941) 371-3732
(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 follow	ring amount:
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy

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: 13750 TR	EELINE LLC
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any: 13750 TREELINE AVENUE, STE 1-5 FT. MYERS,FL 33919
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	900 SARASOTA CENTER BLVD SARASOTA,FL 34240
3/16/2007	L07000017301
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o	
Registered Agent:	WILLIAM H HICKS
Registered Office Address:	900 SARASOTA CENTER BLVD SARASOTA,FL 34240
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address: <u>(MUST BE FLORIDA STREET ADDRESS)</u>	EW Registered Office address: DICKURLICHESO RICHARD A. UIRICA 2940 SOUTH TAMIAMI TRAIL SARASOTA FL 34239
If the limited liability company is not organized under the that after the change or changes are made, the Florida stroffice of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company. (Signature of a member or authorized representative of a member)	reet address of the registered office and the business exase of a Florida limited liability company it is
LINDY L. 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 part familiar with and accept the obligations of my position of this document is being filed to merely reflect confirm that the limited lightly company has been notification.	proper and complete performance of my daties, and learn as registered agent as provided for in Gapter 608, a change in the registered office address, Thereby ited in writing of this change.
(Signature of Registered Agent)	
Division of Corporations, P.O. Bo	ox 6327, Tallahassee, FL 32314