#107000108113

(Requestor's Name)						
(Address)						
(Mudicasa)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
(South Site 1 to 1						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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SECRELARY OF STATE

KEALY EXAMPLER JAN 25 2012

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJ	SUBJECT: 1 BAT 2, LLC						
	Name of I	Limited	l Liabili	ity C	ompany		
Dear S	Sir or Madam:						
The en	nclosed Registered Agent/Registered (Office (Change	and 1	fee(s) are submitted for filing.		
Please	return all correspondence concerning	this m	atter to	the f	following:		
	George Tuttle						
	Name of Person						
	4 847 0 11 0						
	1 BAT 2, LLC Firm/Company			_			
	907 NE 7th Street						
	Address						
	Boynton Beach, FL 33435	;					
	City/State and Zip Code						
E-	georgetuttlemd@yahoo.cor mail address: (to be used for future annual report r	TI notificatio	on)	_			
For further information concerning this matter, please call:							
	J	•					
	George Tuttle	_ at (_	561	_)	968-2995 ext 224		
	Name of Person			Area C	Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS: MAILING ADDRESS:						
	Registration Section Registration Section Division of Corporations Division of Corporations						
	Clifton Building P.O. Box 6327						
	2661 Executive Center Circle Tallahassee, Florida 32314						
	Tallahassee, Florida 32301						
Enclosed is a check for the following amount:							
	\$25 Filing Fee		\$5	5 Fil	ing 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.

Name of the limited liability company:	1 BAT 2, LLC					
2. (a) Principal office address of limited liability company	0050 0 44 440 144 4					
(Note: MUST BE STREET ADDRESS)	Port ST Lucie, FL 34952					
(b) Mailing address of limited liability company:	907 NE 7th Street					
(Note: MAY BE POST OFFICE BOX)	Boynton Beach, FL 33435					
3. Date of filing/registration in Florida	L07000108113 4. Document number					
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:					
Registered Agent:	Roberts, Gary Esq					
Registered Office Address:	324 Datura St, Ste 223 West Palm Beach, FL 33407					
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	W Registered Office address 3					
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	907 NE 7th Street Boynton Beach ,FL33435					
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 of authorized representative of a member						
George Tuttle Printed or typed name of signee	_					
	gree to act in this capacity. I further agree to					
I hereby accept the appointment as registered agent and a comply with the provisions of all statules relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	oper and complete performance of my duties, sition as registered agent as provided for in trely reflect a change in the registered office y has been notified in writing of this change.					

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

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