L1200040527

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12 MAY 29 PM 3: 43 SECRETARY OF STATE ALLARASSEE, FLORID

C. LEWIS

MAY 3 0 2012

EXAMINER

COVER LETTER

Division of Corporations				
SUBJECT: 11925 UC				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
Robert Bailey				
Name of Person				
Firm/Company				
401 E Las Olas Blvd Suite 130-521				
Address				
Ft Lauderdale, FL 33301				
City/State and Zip Code				
and authoronon@aarthlink nat				
goodearthpropman@earthlink.net E-mail address: (to be used for future annual report notific	ation)			
For further information concerning this matter, please call:				
•				
Robert Bailey at	(954) 463-9099			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section 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	\$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.	Nar	ne of the limited liability company:	5 LLC
2.	(a)	Principal office address of limited liability company	401 East Las Olas Blvd
	` '	(Note: MUST BE STREET ADDRESS)	Suite 130-521
			Ft Lauderdale, FL 33301
	(b)	Mailing address of limited liability company:	401 East Las Olas Blvd
		(Note: MAY BE POST OFFICE BOX)	Suite 130-521
			Ft Lauderdale, FL 33301
		3/23/12	L12000040527
3.	Dat	e of filing/registration in Florida	4. Document number
5.	(a)	Registered Agent and Registered Office shown on	the records of the Florida Dept of state:
		Registered Agent:	Poh. Baly =
		Registered Office Address:	14831 Nu 7/26 5
			Many PL 33/00
			ं
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u>		
		NEW Registered Agent:	Robert Bailey
		NEW Registered Office Address:	401 East Las Olas Blvd
		(MUST BE FLORIDA STREET ADDRESS)	Suite 130-521
			Ft Lauderdale ,FL 33301
If	the l	imited liability company is not organized under the	laws of the State of Florida, it is hereby

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

Robert Bailey

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 statules 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 tability company has been notified in writing of this change.

Signature of Registered Agent

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