## L18000 164532

| (Requestor's Name)                      |  |  |
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| (Address)                               |  |  |
|   |  |  |
| (Address)                               |  |  |
| (C) (Class (C) (D) 40                   |  |  |
| (City/State/Zip/Phone #)                |  |  |
| PICK-UP WAIT MAIL                       |  |  |
|   |  |  |
| (Business Entity Name)                  |  |  |
|   |  |  |
| (Document Number)                       |  |  |
|   |  |  |
| Certified Copies Certificates of Status |  |  |
|   |  |  |
| Special Instructions to Filing Officer: |  |  |
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Office Use Only



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## **COVER LETTER**

Amendment Section

TO:

| Division of Corporations                              |   |
|---|---|
| 11640 WADNED 11 C                                     |   |
| SUBJECT: 11640 WARNER LLC<br>Name of Corporation      |   |
| realite of Corporation                                |   |
| DOCUMENT NUMBER: L18000164532                         |   |
| The enclosed Statement of Change of Registered Of     | fice/Agent and fee are submitted for filing.            |
| Please return all correspondence concerning this ma   | tter to the following:                                  |
| Wallace Rodecker                                      |   |
| Name of Contact Person                                |   |
| 11640 WARNER LLC                                      |   |
| Firm/Company  | <del>-</del>  |
| 17284 Newhope St #222                                 |   |
| Address   | <del></del>   |
| Fountain Valley, CA 92708                             |   |
| City/State and Zip Code                               | <del></del>   |
| wallace@rodecker.com                                  |   |
| E-mail address: (to be used for future annual rep     | ort notification)                                       |
| For further information concerning this matter, pleas | e call:   |
| Wallace Rodecker                                      | at (714 )241-7368  Area Code & Daytime Telephone Number |
| Name of Contact Person                                | Area Code & Daytime Telephone Number                    |
| Enclosed is a \$35.00 check made payable to the Dep   | artment of State.                                       |
| Mailing Address: Amendment Section                    | Street Address:   |
| Division of Corporations                              | Amendment Section Division of Corporations              |
| P.O. Box 6327   | The Centre of Tallahassee                               |

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314