721073

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

Office Use Only



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12/11/08--01011--019 **35.00

RA change Theus 12-12-08



COVER LETTER

TO:	O: Amendment Section Division of Corporations								
SUBJ	ECT:_	Li v e	Oak	Village, I	nc. ime of Corporatio	n)			
DOC	UMENT	ΓNUME	BER:_	721073					
The er	iclosed	Stateme	nt of C	hange of Register	ed Office/Agent a	and fee are submitted for filing.			
Please	return :	all corres	sponde	nce concerning th	is matter to the fo	ollowing:			
				Ramona E. (Nan	Leccese ne of Contact Pers	son)			
				Attwood Ph	illips Inc. (Firm/Company)				
		<u> </u>		385 Dougla	s Avenuee S (Address)	uite 3000			
					Springs, FL				
For fu	rther in	formatio	n conc	erning this matter	/State and Zip Co , please call:	ode)			
	R	amona (Name	Leco of Co	cese ntact Person)	at (<u>4</u>	07) 644-4500 urea Code & Daytime Telephone Number)			
Enclo	sed is a	\$35.00 c	check n	nade payable to th	ne Department of	State.			
			Am Div P.O	ling Address: endment Section ision of Corpora . Box 6327 lahassee, FL 323	tions	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chang	vovisions of sections 607.0502, 617.0. ge is submitted for a corporation orgo to change its registered office or regi	anized under the laws	of the State of	Florida
1. The name of the	e corporation: Live Oak Vill	lage, Inc.		
2. The principal of	ffice address: C/o Attwood Pl	nillips Inc.	385 Dougla	ıs Avenue¶
_Suite_30	000, Altamonte Springs.	FL 32714		
3. The mailing add	dress (if different): SAME		·	
4. Date of incorpo	3			
5. The name and s Florida Departn	treet address of the current registered nent of State:	agent and registered	office on file with	ı the
_	Taylor & Carls PA			
_	850 Concourse Pkwy Sou	ith, #105	•	4
_	Maitland, FL 32751		学 兴	
6. The name and s (if changed):	treet address of the new registered ag	ent (if changed) and /	or registered off	PELLED PELLED
_	Attwood-Phillips, Inc.			TOTAL
_	385 Douglas Avenue, Su			RIDA
_	(P.O. Box NOT acceptated) Altamonte Springs, FL.	•		
The street address as changed will be	s of its registered office and the street identical.	et address of the busi	ness office of its	registered agent,
Such change was authorized by the	authorized by resolution duly adop board, or the corporation has been	ted by its board of di notified in writing of	rectors or by an o	officer so
Signature (Signature	of an olycer or director)	VANES A. (Printe	Tow Spon V	n. AESIDENT
1	te appointment as registered agent of comply with the provisions of all st I am familiar with and accept the of filed merely to reflect a change in een notified in writing of this change			
		/2	(Date)	8
(Signa	ture of Registered Agent)		(Date)	
If signing on beha	ılf of an entity:			
(Тур	ed or Printed Name)			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *