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S. HAWKES

JUL 2 8 2010

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Meeks Investments, LLC Name 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 this matter to the following:	
Robert G. Meeks Jr  Name of Person	
Meeks Investments LLC Firm/Company	
6923 Narcoossee RD Ste 603 Address	
Orlando, FL 32822 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Robert Meeks at (321) 282 8238	
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 following amount:	
\$25 Filing Fee  \$\times \text{\$55 Filing Fee & Certified Copy}	

INHS18 (5/08)

## 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: 2. (a) Principal office address of limited liability company: (b) Mailing address of limited liability company: 3. Date of filing/registration in Florida Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Robert G. Meeks Tr Registered Agent: Registered Office Address: riando (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: no change) **NEW** Registered Agent: Nar Coossep **NEW Registered Office Address:** (MUST BE FLORIDA STREET ADDRESS) 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 areaffirmed to vote of the members of the limited liability company or as otherwise provided in the article of organization or the operating agreement of the limited liability/company.

Signature of a member or authorized representative of a member

I hereby accept the appointment as registered agent and agree to act in this capacity with the agree to comply with the provisions of all statutes relative to the proper and complete performance of my auties, 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 liability 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