L0000000 3931

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B. BOSTICK

FEB 7 2011

EXAMINER

COVER LETTER

_	n of Corporations						
SUBJECT: THE BRIGANN COMPANY, L.L.C.							
Name of Limited Liability Company							
Dear Sir or Mad	dam:						
The enclosed R	egistered Agent/Registered	l Office Ch	ange and fee(s) a	re submitted f	for filing	••	
Please return al	l correspondence concernin	ng this mat	ter to the following	ng:			
 	James J. Kennedy III Name of Person	······································					
	Carlton Fields, P.A.					- 4	
	Firm/Company.				E _c	A	
e estat e	PO Box 3239 Address				,ORC :	11 FEB -4	
1 1 4 2 3	Address			** ,	523	1	
					LANT OF STATE ASSEE, FLORIDA		
	Tampa, FL 33601-3239	a	•			ÀH 3	
	City/State and Zip Code	<u> </u>			DATE DATE	 ω	
					A	\sim	
E-mail address	s: (to be used for future annual report	t notification)	 .				
For further info	rmation concerning this ma	itter, pleas	e call:				
oL	yce F. Bentubo	at (813)	223-7000)		
	Name of Person	*** \		aytime Telephone			
Registrat Division Clifton B 2661 Exc	T/COURIER ADDRESS: ion Section of Corporations Building centive Center Circle		MAILING ADE Registration Sect Division of Corp P.O. Box 6327 Tallahassee, Flor	cion orations			
Enclosed is a check for the following amount:							
\$25 F	Filing Fee	Γ	\$55 Filing Fee	& Certified C	Сору		
Car	Iton Fields						
	Check # 50063	33					

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:	The Brigann Company, L.L.C.					
2. (a) Principal office address of limited liability com	pany: 4724 Cheval Blvd					
(Note: MUST BE STREET ADDRESS)	Lutz, FL 33558					
(b) Mailing address of limited liability company:	4724 Cheval Blvd					
(Note: MAY BE POST OFFICE BOX)	Lutz, FL 33558					
04/06/2000	L0000003931					
3. Date 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:	Kennedy, James J III A = T					
Registered Office Address:	Buchanan Ingersoll P.G. 5					
	401 E. Jackson Street, Suite 2500					
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u>						
NEW Registered Agent:	CFRA, LLC					
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	4221 W. Boy Scout Blvd Suite 1000					
MOST DE PEORIDA STREET ADDRESS	<u>Tampa</u> ,FL <u>33607</u>					
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						
Tames J Kenned II- Printed or typed name of signee						
I hereby accept the appointment as registered agent at comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability company of the company of	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, y position as registered agent as provided for in merely reflect a change in the registered office pany 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						