100000000335

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

Office Use Only



200162581602

11/12/09--01024--001 **25.00

FILED

09 NOV 12 AM 11: 24

SECRETARY OF STATE

D. BRUCE
NOV 1 3 2009
EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations							
SUBJ				orise, LLC		···		
	Name of	Limite	ed Liabi	lity Company	У			
Dear	Sir or Madam:							
The e	nclosed Registered Agent/Registered	Office	Change	e and fee(s) a	re submitted f	or filing.		
Please	e return all correspondence concerning	this r	natter to	the following	ng:	•		
	Daniel P. Reedy							
-	Name of Person							
•	Reedy Enterprise, LLC		· 	_				
	Firm/Company					SECR	09 N	
	6606 Virginia Crossing					ETAR	31 A0	
	Address					EC.	 ,>>	i
	University Park, FL 34201	<u>. </u>				F STA FLOR	9 NOV 12 AM 11:24	-
	City/State and Zip Code					IDA A	2	
E	reedy@live.com -mail address: (to be used for future annual report	notificat	ion)					
For fu	orther information concerning this mat	ter, ple	ease call	:				
	Daniel P. Reedy	_ at (_	941		320-8899		_	
	Name of Person			Area Code & Da	ytime Telephone N	Number		
	STREET/COURIER ADDRESS:		MA	ILING ADD	RESS:			
	Registration Section		•	gistration Secti				
	Division of Corporations			ision of Corpo	orations			
	Clifton Building			. Box 6327				
	2661 Executive Center Circle Tallahassee, Florida 32301		Tal	lahassee, Flori	ida 32314			
	Enclosed is a check for the following	ıg am	ount:					
	\$25 Filing Fee		\$5	5 Filing Fee	& Certified C	ору		

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:	Reedy Enterprise, LLC					
2. (a) Principal office address of limited liability company:						
(Note: MUST BE STREET ADDRESS)	6606 Virginia Crossing, University Park, FL 34201					
(b) Mailing address of limited liability company:						
(Note: MAY BE POST OFFICE BOX)	6606 Virginia Crossing, University Park, FL 34201					
August 18, 2000	L00000010335					
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:	Janet L. Reedy					
Registered Office Address:	6606 Virginia Crossing S → University Park, FL 3420 ↑					
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:						
NEW Registered Agent:	Daniel P. Reedy					
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	6606 Virginia Crossing, University Park ,FL34201					
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						
Daniel P. Reedy						
Printed or typed name of signee	_					
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my participation of the company of the compa	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office by 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