## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCACO0000023 Phone : (850)222-1092 : (850)878-5368 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

LLC REGISTERED AGENT CHANGE USA BROADMOOR, LLC Certificate of Status Certified Copy Page Count Estimated Charge

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## COVER LETTER

	COVERDE	8 1 11/1/	
TO: Registration Section Division of Corporations			
SUBJECT: USA Broadmoor, LLC			
	f Limited Lieb	pility Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered	Office Chang	to and fee(s) are submitted for filing.	
Please return all correspondence concerning	_	•	
• • • • • • • • • • • • • • • • • • •		g.	
L. Anthony Russo			
Name of Person		<del></del>	
Internacional Realty, Inc.			
Firm/Company	****	<del>_</del>	
2251 Broadway, Suite 108			
Address		<del>.</del>	
San Antonio, TX 78215			
City/State and Zip Code		<del></del>	
trusso@internacionalrealty.com			
E-mail address: (to be used for future annual repor	t notification)		
For further information concerning this ma	itter, please ca	11:	
T. Russo	210	281-1469	
Name of Person	at (	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	M	IAILING ADDRESS:	
	Registration Section		
Registration Section	EC.	Division of Corporations	
Registration Section Division of Corporations	Di	ivision of Corporations	
Division of Corporations Clifton Building	Di	Ivision of Corporations O. Box 6327	
Division of Corporations Clifton Building 2661 Executive Center Circle	Di P.		
Division of Corporations Clifton Building	Di P.	O. Box 6327	
Division of Corporations Clifton Building 2661 Executive Center Circle	Di P.· Te	O. Box 6327	

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: USA Broadmoor, LLC (a) Principal office address of limited liability company: 2251 Broadway, Suite 108
 (Note: MUST BE STREET ADDRESS) San Antonio, TX 78215 (<u>Note: MUST BE STREET ADDRESS</u>) (b) Mailing address of limited liability company: 2251 Broadway, Suite 108 (Note: MAY BE POST OFFICE BOX) San Antonio, TX 78215 11/05/2001 L01000019090 Date of filing/registration in Florida Document number (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: EVERETT, ANTHONY Registered Office Address: 5005 INTERBAY BOULEVARD TAMPA, FL 33611 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: 끆 NEW Registered Agent: C T Corporation System 1200 South Pine Island Road NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) Plantation FL 33324 If the limited liability company is not organized under the laws of the State of Florida, it is hereby onfirmed 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 くとり Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, 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, thereby confirm that the fimited liability company has been notified in writing of this change.

By: C.T. Organium System

Signature of lighted Agent Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 -FILING-FEE:-\$25.00-

INHS18 (05/08)